

Frank T. Hawkins Endowment Scholarship



Prairie View A&M University
Department Of Mathematics

Semester which Scholarship will apply: _____

PVAMU ID Number: _____ Date of Birth: _____

Legal Name: _____

 Last First Middle Initial

Permanent Address: _____

 Street or P.O. Box City, State and Zip

Local Address: _____

 Street or P.O. Box City, State and Zip

Home Telephone Number : () _____

Local Telephone Number: () _____

Classification (circle one) Freshman Sophomore Junior Senior

Major Minor

Current Semester GPA:		Current Semester Hours:	
Cumulative GPA:		Cumulative Hours:	

Extracurricular Activities: _____

U.S. Citizen:	Male	State of Legal Residence and Country	
	Female		
Resident Alien:	Yes	No	

Have you completed a financial aid application?	Yes	No
Are you eligible for financial aid?	Yes	No
Are you currently receiving financial?	Yes	No

My signature below certifies that the information provided in this application is true and complete to the best of my knowledge. I hereby give Prairie View A&M University permission to release this information for review, recruitment and public relations. If necessary, I also authorized release of my college transcript to University Colleges/Departments as well as outside donors. Completion of the application does not guarantee award.

Signature: _____ Date: _____