

# Jann Wilkerson Scholarship Application

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
College or University: \_\_\_\_\_  
Expected Graduation Date: \_\_\_\_\_  
Semester in Graduate Program: \_\_\_\_\_

## I) Scholarship

- A) Current overall GPA: \_\_\_\_\_
  - B) Academic honors/awards:  
\_\_\_\_\_
  - C) Scholarly publications, presentations (if applicable) \_\_\_\_\_
- 

## II) Leadership: Elected or appointed leadership positions:

Organization	Title of Office	Dates
A) _____	_____	_____
B) _____	_____	_____
C) _____	_____	_____

## III) Service

- A) Service to your university (committees, NSSLA chapter, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- B) Service to your community/association  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## IV) Other Information

- A) Are you currently employed in a paid position? \_\_\_\_\_  
B) If so, please describe: \_\_\_\_\_  
\_\_\_\_\_
- C) How many hours/week: \_\_\_\_\_

## V) General Questions: Please answer the following three questions on a separate piece of paper.

1. Why have you chosen to enter the field of speech language pathology or audiology?
2. Describe any extenuation financial circumstances that present a hardship for you.
3. Why do you feel you should receive this scholarship?

**I have enclosed a recommendation with this application from the following professor/instructor:** \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

To the best of my knowledge, the above student is a full-time graduate student in our program.

College/University Advisor's Signature: \_\_\_\_\_  
University/Program: \_\_\_\_\_  
Date: \_\_\_\_\_