



# PHIL MCDOWELL SCHOLARSHIP APPLICATION

**PLEASE PRINT:** APPLICANTS MUST BE ELIGIBLE FOR ADMISSION TO THE UNVERISTY OF WEST GEORGIA

Name \_\_\_\_\_ UWG ID Number \_\_\_\_\_  
(Last) (First) (Middle)

Mailing Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

Sex \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

High School Attended \_\_\_\_\_

JV or Varsity Sport Program \_\_\_\_\_

County of Residence (regardless of where you are living while attending classes) \_\_\_\_\_

How long have you lived in the above listed county? \_\_\_\_\_

In general, students must be enrolled full-time (12 hours) to receive a scholarship. List the hours you will be enrolled.

Fall Semester \_\_\_\_\_ Spring Semester \_\_\_\_\_ Summer Semester \_\_\_\_\_

**Special Instructions:** Please attach a 1 page essay describing your involvement in school, academic goals and leadership aspirations.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Please return this application to the University of West Georgia's Financial Aid Office no later than February 1<sup>st</sup>, 2012:

Enrollment Services Center  
Parker Hall  
Carrollton, Georgia 30118  
Fax 678-839-6422

**DO NOT WRITE BELOW THIS LINE**

High School GPA _____	Transfer GPA _____	UWG _____
SAT/ACT Verbal _____	Transfer Hours _____	UWG Hours _____
SAT/ACT Math _____	Last Degree GPA _____	Financial Need _____
Total SAT/ACT _____		