



Pi Chi Omega

Mail Completed Scholarship Application to:
Vern E. Toblan, Executive Director
Pi Chi Omega
P.O. Box 8149
Wilmington, DE 19803
Phone: 302-376-6714 FAX: 302-376-3551
e-mail: verntoblan@verizon.net

Application for Scholarship

1. Name _____ Date: _____
(Last name) (First name) (M.I.)
2. Present Address: _____
(Number & Street) (City) (State & Zip Code)
3. Home Address: (If different than above) _____
4. Birth Date: _____ Male: _____ Female: _____ Married: _____ Single: _____
5. Those dependent on your support: (Show name and relationship)

6. University where you wish to use this scholarship: (Name) _____
(Location) _____ (Beginning When?) _____
7. Have you been accepted by this university: _____ Date of Acceptance: _____
8. If you already attend this university, how many years have you attended? _____
9. Which class will you be attending in the next academic year? Freshman: _____ Sophomore: _____
Junior: _____ Senior: _____ Graduate: (M.S.) _____ (Ph.D.) _____*
10. List your major field of study: _____
11. List your minor fields of study: _____
12. Do you plan to specialize within your major field of study? If so, briefly describe your planned specialization.

- If you are a graduate student and have selected your degree research project, on a separate sheet of paper, please give a brief description of this project, not to exceed one double-spaced page.
13. Other colleges attended: _____
(Show dates) _____

14. What are your plans for a career after graduation? _____

15. List other scholarships you now hold: _____

16. List other scholarships for which you are applying: _____

* Be sure to indicate expected date of graduation.

-over-

