

Margaret and Walt Lowell Voluntary Service Scholarship Application Form - 2009

Return completed form and materials to the Department of Kinesiology and Sports Studies by **4:00pm, April 17, 2009**. Questions may be addressed to Dr. Jill Owen, 581-2215, jdowen@eiu.edu.

Applicant Information (Please print or type)

Name _____ SS# _____

Address

Local _____ Phone _____

City _____

Home _____ Phone _____

City _____ State _____ Zip _____

High School _____ H.S. Graduation Year _____

EIU Major _____

Minor _____

Class level _____

(must be sophomore, junior, or senior with at least one semester of residence at EIU and currently enrolled at EIU)

Semester and year in which you expect to graduate _____
(Sem) (Yr)

*Please describe your volunteer service in your local community (ies) in narrative form (200 word maximum).

Name(s) and Address(es) of Parents:

Name _____

Address _____

City _____ State _____ Zip _____

Name _____

Address _____

City _____ State _____ Zip _____