



GLENVILLE
STATE UNIVERSITY

Academic Scholarship Application

Name: _____ Student ID Number: _____

Are you applying as an undergraduate or graduate student? _____ Undergraduate _____ Graduate

Which academic year are you applying for? _____ 2022-2023 (fall 2022/spring 2023) _____ 2023-2024 (fall 2023/spring 2024)

Permanent Address: _____

PO Box/Number/Route

City

State

Zip

Local Address: _____

PO Box/Number/Route

City

State

Zip

High School Name: _____ Date of High School Graduation: _____

If you are a Graduate Student, please list other college(s) attended, with majors and graduation dates.

School Name _____ Major: _____ Graduation date: _____

School Name _____ Major: _____ Graduation date: _____

School Name _____ Major: _____ Graduation date: _____

School Name _____ Major: _____ Graduation date: _____

Extracurricular Activities: _____

College Major: _____ Expected Graduation Date: _____

Have you completed the Free Application for Federal Student Aid for the upcoming year? Yes / No
Application must be received to be considered for scholarships.

When did you begin full time enrollment at GSU? _____ Are you eligible for the PROMISE Scholarship? Yes/No

Are you receiving scholarships from other organizations? Yes / No If yes, list types and amount

Scholarship: _____ Amount: \$ _____

Scholarship: _____ Amount: \$ _____

Scholarship: _____ Amount: \$ _____

Scholarship: _____ Amount: \$ _____

Please check if you are a dependent child of

☐ Timber Supplier

☐ Dominion Employee

☐ Presbyterian Affiliation

☐ Gilmer County Veteran

☐ Verizon Employee

☐ Affiliated with Roanoke

☐ Oil and Gas Employee

☐ Athlete (specify sport)

WV United Methodist

☐ Delta Zeta Sorority Member

☐ Past Troy Elem. student

Church

Did either parent attend college? Yes / No

Did either of your parents graduate from Glenville State University? Yes/No

Do you have special circumstance that you wish to share with the Scholarship Committee? _____

Office Use Only:

Date Application Received: _____ Date Application Sent to Foundation: _____

Return form to

Mail: Office of Financial Aid
Glenville State University
200 High Street
Glenville, WV 26351

Email: financial.aid@glenville.edu
Phone: 304-462-4103
Fax: 304-462-4407
Secure Upload – [Cognito Forms](#)