DSU Staff Association Part-Time Employee Scholarship Application

To uphold the mission of lifetime learning, the Dixie State University Staff Association offers one $600.00 scholarship each semester to a current part-time staff employee who is pursuing higher education here at Dixie State.

The primary purpose of the DSU Staff Association is to foster a harmonious and cooperative relationship between administration, faculty, staff members and students. We invite all qualified employees to apply for this opportunity.

BEFORE COMPLETING THIS APPLICATION, PLEASE READ THE FOLLOWING:

- Applicant must be working an average of 20-29 hours per week and have been employed for at least one full year prior to application deadline.
- Applicant must attach cover letter describing the need for the scholarship and how the scholarship would be used.
- Applicant must uphold a current GPA of 2.0 or better.
- If selected, the recipient must register for a DSU course that either fulfills a requirement towards their degree or that will benefit them in the completion of their duties of their DSU job.
- If selected, the recipient must give a brief report of how the scholarship as used at the annual Staff Association Spring Social.

PART I

Dixie State University Student/Employee ID # ________________________ (required)

Last Name: ___________________________ First Name: ___________________ Middle Initial: ______

Date of Birth: __________________________ Email address: ______________________________

Best Contact Address: ________________________________________________________________

City: ___________________________ State: _________ Zip: ______________

Home Phone Number: _____________________ Alternate/Cell Phone Number: __________________

Year in College: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior Current Cumulative GPA: _________

Declared Major: ____________________________________ (Must be in a BA or BS Degree at Dixie)

If Integrated Studies, specify areas of study: ________________________________ & ________________________________
RESUME INFORMATION
To be considered for the DSU Staff Association Scholarship you must complete this section. Please include reasons you think you would be the best for this scholarship and how it would benefit you and the University.

Please tell us about your need for financial assistance and other resources you may have:
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

Please tell us why you are pursuing higher education:
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

Please tell us about your current employment experience with DSU:
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

I understand that by completing this application, I will be considered for a scholarship and that I am not guaranteed a scholarship.

I have read the instructions and certify that the above information provided in this application is true and correct to the best of my knowledge.

I also declare that if I attend Dixie State University, I will abide by the academic, scholastic and social standards of the college. A student found guilty of non-disclosure or misrepresentation in completing this form will be subject to disciplinary action, loss of scholarship and/or dismissal from DSU.

I hereby authorize the scholarship office to release this application and any attached documentation, including GPA, to the Committee.

Signature __________________________________________ Date ____________________________

Application Completion Checklist:
☐ Completed application, neat, legible and written or typed in black ink.
☐ Cover letter of introduction, stating why you should be chosen for the scholarship
☐ 2 Letters of Recommendation

Submit your completed application to:

DSU Scholarship Office
Assistant Director, Scholarships
225 South University Ave
St George, UT 84770