2014-2015 Greg Ferguson Memorial Scholarship Application
for
Marshall University Students

Student's full name: _____

Parent or legal guardian's name: _____

Permanent Address: _____

City: _____ **State:** _____ **Zip:** _____ **Phone:** _____

Student's Marshall University ID Number: 901 _____

By submitting this application, I understand that the Greg Ferguson Scholarship Committee will have access to my application, and verify that:

- I have attached a 300 word explanation of why I qualify for and deserve to receive this scholarship.
- I have attached a copy of my high school transcript.
- I am committed to completing my higher education. I am interested in one of the following areas of study and plan to take classes at Marshall University that are required and will prepare me for a major in: Health Care, Human Resources, Agriculture or Business Management.

AND/OR

-I intend to be a member of the Marshall University Football team during the year of the award and that I will not receive a full athletic scholarship.

Student Signature: _____ **Date:** _____

Applicant, please complete and submit this application to the Senior Counselor at your high school by Tuesday, April 1, 2014

This verifies that the above named student is a graduating senior and has shown interest in the areas of study listed above or was on the high school football team and intends to be a member of the Marshall University football team.

Counselor Signature: _____ **Date:** _____

High School: _____ **Phone:** _____

Spring Valley, Tolsia, or Wayne High School in Wayne, WV or their successors

For Internal Use Only
SCH 004
E 095
Logged by: _____
Date Logged: _____

Counselors please submit completed applications by April 7 to:
Office of Student Financial Assistance
116 Old Main, Marshall University, 1 John Marshall Drive,
Huntington, WV 25755-3300
Phone (304) 696-3162
Fax (304) 696-3242

Once awards have been made, students will be notified through their myMU account if they will be receiving the scholarship.