



Application for SIUC Graduate Tuition Scholarship

Southern Illinois University Carbondale

Purpose: The purpose of the SIUC Graduate Tuition Scholarship as designated by the Board of Trustees is to assist students who have attained high levels of academic achievement.

Name _____ Student Identification # _____
Last First Middle

Mailing Address _____ Phone _____
No. and Street City State Zip

Degree Sought: Masters Ph.D. Name of program _____

Citizenship: U.S.A. Citizen Permanent Resident of U.S.A. Non-U.S.A. Citizen

Race (optional): American Indiana or Alaskan Native Asian or Pacific Islander Black, non-Hispanic
 Hispanic White, non-Hispanic Other

Please check (X) the specific term(s) for which you're seeking a scholarship:

Fall, 20____ Spring, 20____ Summer, 20____
(Note: Award maximum is three semesters, must reapply each semester, does not have to be consecutive)

Have you received a scholarship in previous terms?

Yes No If yes, please list semesters _____

In order to be eligible for an SIUC Graduate Tuition Scholarship you must complete the following draft registration Compliance statement:

DRAFT REGISTRATION COMPLIANCE STATEMENT

- I certify that I am not required to be registered with Selective Service because:
 - I am female
 - I am in the Armed Services on active duty (note: members of the reserves and the national guard are not considered to be on active duty.)
 - I have not reached my 18th birthday.
 - I was born before 1960
 - I am a permanent resident of the Trust Territory of the Pacific Islands or the Northern Mariana Islands.
 - I am an international student (applicable only to State of Illinois funded programs).
 - I am an incarcerated student.
- I certify that I am registered with Selective Service.

I declare under penalty of perjury that the foregoing is true and correct. I am fully aware that any intentional falsification of information contained herein may result in the denial of the application or loss of aid currently being received. I realize furthermore that this scholarship will be revoked if I fail to meet the designated requirements of being enrolled in a graduate degree program and carrying 9 hours of graduate credit during the fall and spring semester, 3 hours of graduate credit during the summer session, or if I receive any other type of a tuition scholarship.

As an applicant for a tuition or fee waiver award from Southern Illinois University, I understand that the University has the legal authority to release my name and address, the name of my former high school or college, the name of my award, and the award amount. This release is valid for the period of time the tuition waiver is in effect.

Signed _____ Date _____

For Graduate School use only: Admitted to program: Yes No Undergraduate GPA _____

Recommended Denied

Associate Dean, Graduate School Date

Return completed application to:
Graduate Assistantship/Fellowship Office
Graduate School MC 4716
Southern Illinois University
Carbondale, Illinois 62901-4716

Deadline Dates:
FALL SEMESTER – JULY 15
SPRING SEMESTER – NOVEMBER 15
SUMMER SEMESTER – APRIL 15