DR. J. HENRY WALKER MEMORIAL SCHOLARSHIP APPLICATION

SECTION A:	Full Name:			
BIOGRAPHICAL INFORMATION	Last	First Middle		
	Preferred Name:	CWID:		
	Current Status:	☐ Transfer ☐ University of Alabama Student		
	Major or Intended Major: _	Career Objective:		
	Social Security Number:	Birthday:/ mm dd yy		
	Mailing Address:			
		Street or Route	Apt. #	
	City	County		
	State	Zip Code		
	Home Phone Number: ()	Daytime Phone Number: ()		
	Permanent Address (if different from above):			
		Street or Route	Apt. #	
	City	County		
	State	Zip Code		
	Home Phone Number: ()	Office Phone Number: ()		
SECTION B:	High School:			
HIGH SCHOOL BACKGROUND	Name	County	State	
	Senior Guidance Counselor:	Phone Number: ()		
	High School GPA (on a 4.0 scale): _	PSAT/MSQT: M V Sel. Index		
	ACT Composite: ACT M	fath Score: SAT: M V Total		

PLEASE REMEMBER TO COMPLETE THE REMAINING SECTIONS

Graduation Date: ___/__ of ___ in graduating class

SECTION C: ACTIVITIES

Please submit a statement describing all significant scholarly accomplishments, honors, leadership and service experiences either in the space provided below or as a separate document. This statement should not exceed 1 page of single-spaced text. The committee is specifically interested in assessing your potential to impact science and society. Please indicate the appropriate grade level for each accomplishment.

SECTION D:	College(s) Attended:		
COLLEGE	Institution:	Dates Attended:	
HISTORY	☐ Quarter / ☐ Semester Hours Earned:	GPA:	
	Institution:	Dates Attended:	
	☐ Quarter / ☐ Semester Hours Earned:	GPA:	
	Institution:	Dates Attended:	
	☐ Quarter / ☐ Semester Hours Earned:	GPA:	
	Total Earned Hours:	Cumulative GPA:	
	Please indicate the total hours you anticipate transfer	erring to UA:	
SECTION E: SIGNATURE	I have completed all sections of this application and believe the above to be true to the best of my knowledge.		
	Signature of Applicant	Date	