

Staff Council and Women and Gender Resource Center Scholarships Application Cover Sheet

Application Period: February 1st to March 15th*, 5:00 p.m.

* Check the Staff Council Scholarship website for any deadline extensions or updates.

Incomplete packets will not be reviewed.

If you have any questions, please contact SCScholarships@uh.edu.

Qualification Criteria

To be considered for these two gender-neutral scholarships, the staff member must meet the following criteria.

- Must be employed in a full-time, benefits-eligible position at the UH Main, UH at Katy, or UH at Sugar Land campus for at least one year as of February 1st of this year.
- Must have a cumulative grade point average of 2.5 or higher.
- Must demonstrate a strong commitment to academic excellence and the potential to succeed.

Please submit your application packet as a single PDF file containing all requested information in the following order:

- 1) Application cover sheet (Signed by UH staff member).
- Typed essay (maximum one page, double-spaced, 12-point font, no exception) explaining career goals (professional objectives) and personal statement (why you believe you should receive this scholarship).
- 3) Two letters of recommendation. Letters should be as specific as possible.
- 4) Your resume. The resume should include awards, honors, achievements, work experience, and activities.
- 5) Most recent transcripts of the student. The transcript does not need to be an official copy, but it must be legible.
- 6) FERPA release form.

| Staff First Name: | | Middle Initial: | Staff Las Name | | | |
|---|-----------------------|----------------------|--------------------------------------|------------|-----------|------------|
| Phone Number: | | UH Email Address: | | | | |
| Choose One: | □Undergraduate □Grad | uate □Law | □Medicine □ | □Optometry | □Pharmacy | □Doctorate |
| Choose One: | □New Admitted Student | | □Returning Student □Transfer Student | | | ent |
| If awarded the Scholarship, what term(s) would you like the award disbursed? □Fall □Spring □Summer | | | | | | |

□ I hereby acknowledge that the information submitted in the Staff Council and Women and Gender Resource Center Scholarships application form and in this application packet is true and correct and that I meet all scholarship qualifications.

Employee (UH Staff) Signature

Date Hired (mm/yyyy)