



West Virginia
Higher Education
Policy Commission

**UNDERWOOD-SMITH
TEACHER
SCHOLARSHIP PROGRAM
2012-2013 RENEWAL APPLICATION**

1018 Kanawha Boulevard, East, Suite 700 | Charleston, West Virginia 25301

This form is to be completed by the student and the college/university's financial aid administrator. All applications must be returned to the West Virginia Higher Education Policy Commission and **POSTMARKED BY MARCH 1, 2012.**

PLEASE TYPE OR PRINT (IN INK) ALL ANSWERS

STUDENT'S INFORMATION:

- (1) Name: Last _____ First _____ Middle Initial _____
 (2) Social Security #: _____/_____/_____ (3) Home Phone:____/____/____ Cell: ____/____/____
 (4) Permanent Home Address: (5) E-Mail Address: _____
 Street _____ (6) If applicable, indicate Maiden Name: _____
 City _____ State _____ Zip Code _____ (7) If applicable, indicate Spouse's Name: _____
 (8) Are you a West Virginia resident for tuition and fee assessment? Yes _____ No _____
 (9) Institution you plan to attend during the 2012-2013 academic year: _____
 (10) Academic field of study: _____ (11) Degree being pursued: Baccalaureate _____ Masters _____
 (12) Does this academic program lead to teacher certification? Yes _____ No _____
 (13) Term (s) you plan to attend: Fall and Spring 2012-2013 _____ Fall 2012 only _____ Spring 2013 only _____
 (14) Anticipated year in school for 2012-2013:
 Undergraduate: Junior _____ Senior _____ Graduate: First year _____ Second Year _____
 (15) Expected Graduation Date: _____
 (16) Name and address of nearest relative or friend NOT living with you: _____

Relationship: _____ Phone Number: ____/____/_____

STUDENT'S CERTIFICATION:

- I have reviewed the above information and certify that it is true, accurate and complete to the best of my knowledge.
- I have read, understand and agree to the terms of the Underwood-Smith Teacher Scholarship Program.
- I also certify that proceeds of any scholarship made as a result of this application will be used for educational purposes during the approved academic period at the educational institution named on this form.
- I agree to notify the Higher Education Policy Commission of any change or changes in my choice of an institution of higher education.
- I authorize disclosure of my name and information as an applicant or recipient of an award under this scholarship program.
- I have completed the Student's Statement of Purpose on page 2 of this form.

Student's Signature _____ Date _____



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STUDENT'S STATEMENT OF PURPOSE:

Please type or print a brief essay (300 word limit) describing why you wish to become a teacher. Think about and write your statement carefully. The selection committee will use your statement as one of the criteria in the selection of recipients. The completed essay should be attached to your application.

FINANCIAL AID OFFICIAL'S CERTIFICATION:

- (1) Is the student a West Virginia resident for tuition and fee assessment? Yes _____ No _____
- (2) Is the student making satisfactory academic progress? Yes _____ No _____
- (3) Overall Undergraduate GPA (as of December 31, 2011): _____
- (4) If applicant is a Graduate student, indicate:
 - Overall Graduate GPA (as of December 31, 2011): _____
 - Type of Undergraduate Degree: _____ Graduation Date: _____

As an authorized representative of the institution named below, I certify that the information provided on this form is true, complete and accurate to the best of my knowledge.

Signature _____ Date _____

Print/Type Name and Title _____

E-Mail Address: _____

Name of Institution _____ Telephone Number: ____/____/____