

**Arkansas State University-Newport ADVANCE  
Scholarship Application**

**BACKGROUND:** The Arkansas State University-Newport Academic ADVANCE Scholarship is designed to assist students with persisting in their educational goals. This scholarship is \$500.00 per semester for a maximum of two semesters. This award is open to all ASUN campuses.

**ELIGIBILITY REQUIREMENTS:**

- Applicant must have completed 24 hours at ASU-Newport and carry a minimum 3.50 term and cumulative grade point average (GPA).
- Applicant will be enrolling as a full-time student in the Fall semester at ASUN and not be receiving the ASUN Academic Scholarship or ASUN Incentive Scholarship.
- Applicants must complete the current year's FAFSA. (ASUN School Code: 042034)

**APPLICATION REQUIREMENT:**

- Completed Student Information Sheet
- Applicants must write an essay (200-250 words) about their goals beyond earning their credential(s) from ASU-Newport. (Note: Include the word count at the bottom of the essay.)

**AWARD AMOUNT:** \$500.00 per semester

**RENEWAL REQUIREMENTS:**

- Students must have a 3.50 cumulative grade point average (GPA) and pass 67% of their courses (PACE).
- The scholarship is for a maximum of two semesters as long as the required cumulative GPA and PACE are met.
- Academic progress will be verified at the end of each term of enrollment by the ASUN financial aid office.

**OTHER INFORMATION:**

- First selection will be given to students who do not receive other forms of financial assistance.
- Scholarship recipients will also be required to attend the annual Scholarship Luncheon and agree to have their names and photos utilized in institutional publications.

**APPLICATION DEADLINE:** Fall 2018: June 1, 2018

To apply, submit the following completed student information page and essay to the address below:

**ASU-Newport Financial Aid Office  
Attention: Pam Smith  
7648 Victory Blvd. Newport, AR 72112**



# SCHOLARSHIP APPLICATION

## Arkansas State University-Newport Advance Scholarship Application

Student Name (PLEASE PRINT): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Preferred Email: \_\_\_\_\_

ASUN ID #: \_\_\_\_\_ Anticipated Semester of Enrollment: \_\_\_\_\_

Degree Intent (CHECK ONE): Technical Certificate \_\_\_\_\_ Associate of Applied Science \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Award Amount: \_\_\_\_\_

Date Student was notified of the decision \_\_\_\_\_