

**David L. & Imogene Garrett Johnston
Memorial Scholarship Endowment
Scholarship Application**

Background: The David L. & Imogene Garrett Johnston Memorial Scholarship Endowment was created to assist an ASU-Newport (Newport campus) student fulfill their educational goal of becoming a nurse. The scholarship is a one-time award that is awarded on an annual basis.

Application Requirements:

- Must be a Graduate of a Jackson County School
- Must be enrolled on the ASU – Newport Campus
- Must be enrolled in an ASU-Newport Nursing program
- Students must have a 2.0 cumulative high school grade point average
- Applicants must complete the current year's FAFSA. (ASUN School Code: 042034)

Award Amount: \$500.00 per semester

Renewal Requirements: The scholarship is a one-time award.

Other Information: Recipient is required to include a letter of thanks or thank you cards (2) addressed to the David L. & Imogene Garrett Johnson Memorial as acceptance of the scholarship

Application Deadline: Fall 2020: June 1, 2020

To apply, complete the following information and attach the essay, and send to:

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

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Applicant Name _____

Home Address _____

Street Address or P.O. Box

City _____ State _____ Zip _____

Social Security # ___ / ___ / _____ Age _____ Married ___ Y ___ N

Number of Dependents _____ Phone # (____) _____ Cell # (____) _____

High School you graduated from _____ Year Graduated _____

High School GPA _____ ACT score _____

Received GED from _____ Year _____

I plan to enroll in approximately _____ hours per semester.

I plan to work _____ per semester and hope to earn approximately _____ per week.

If working, list employer _____.

Planned course of college study _____.

List other sources of financial aid expected to be received for the semester:

List your community, church or volunteer activities or clubs:

Date of Application ___/___/___

Signature _____

FINANCIAL AID OFFICE USE ONLY
Approved _____ Not Approved _____ Award Amount: _____

Date Student was notified of the decision _____