

# Washburn University Chemistry Scholarship Application for Incoming Students

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

High School GPA: \_\_\_\_\_ College GPA: \_\_\_\_\_

Math ACT: \_\_\_\_\_ Science ACT: \_\_\_\_\_ Combined ACT: \_\_\_\_\_

What degree and major do you plan to pursue at Washburn: \_\_\_\_\_

Have you completed an application for admission and scholarship to Washburn University? Yes \_\_\_\_\_ No \_\_\_\_\_

Please write a paragraph outlining your academic goals at Washburn University and your career goals thereafter. Include any other information which you think may be relevant to the selection process.

*Please send this application form, transcript(s), and letter of support to:  
Dr. Shaun Schmidt, Department of Chemistry, Washburn University,  
1700 SW College Ave., Topeka, KS 66621*