

Department of Comparative Cultural Studies
Religious Studies Program

**John and Allie Lea Orton
Scholarship in Religious Studies
Application Form**

Date: _____ Semester/Year for which award is sought: _____

1. Personal Information

Last Name First MI PeopleSoft ID#

Street Address City State ZIP

Telephone _____ Email _____

2. Academic Information

Major _____ Minor(s) _____

Cumulative GPA _____ Expected Graduation _____

Total Semester hours completed by time of scholarship eligibility: _____

Qualified for in-state tuition: Yes No

Qualified for financial aid: Yes No

Receiving other Financial Aid or Scholarships: Yes No

If so, what: _____

3. Scholarship Award Requested

Scholarship amount requested: \$ _____

Submit ALL four application documents together (in one email document)

by **May 01** (for *Fall* disbursement) or **October 01** (for *Spring* disbursement)

to **Dr. Christian A. Eberhart**, Director of Religious Studies Program (email: ceberhart@uh.edu).