



School of Continuing Education
Eastern Illinois University
600 Lincoln Avenue
Charleston, Illinois 61920

USE AS A COVER SHEET FOR EACH APPLICATION

(no staples please)

Checklist for Chapter Review • 2012-13 Scholarship Awards

1. School _____
Chapter name _____
2. Nominating _____ (student name)
3. We have verified that the total completed hours graded and earned at our institution is _____ **quarter or _____ semester** hours (**not including transfer hours, assessment hours, CLEP credit and the like and not including any courses in which the student is currently enrolled**). (Please fill line in carefully to ensure student's eligibility is clear.)
4. We have verified the cumulative grade point average for our institution to be _____.
5. We have verified that the faculty recommendation is from a qualified instructor at this institution.
Yes_____ No_____
6. We have verified that the nominee will need undergraduate degree assistance of at least the face amount of the scholarship at our institution in 2012-13. Yes_____ No_____
7. Please verify by check mark that the following materials are included and correctly and completely filled out:
 Cover Sheet Checklist
 Student Application Form
 Student's Personal Statement
 Faculty Recommendation
 Official Transcript in sealed envelope
8. Information verified by _____

(Chapter Councilor Name)

(Title) _____

(Signature) _____

Address _____

Phone () _____

E-mail _____