

**ATTENTION: THIS FORM MUST BE COMPLETED IN FULL
APPLICATION FOR UNIVERSITY GRADUATE SCHOLARSHIP (UGS)**

**COLLEGE OF EDUCATION, CRIMINAL JUSTICE, AND HUMAN SERVICES
DIVISION OF HUMAN SERVICES
COUNSELING PROGRAM**

ACADEMIC YEAR _____

Requirements:

1. Admission to a graduate program of study in the College of Education, Criminal Justice, and Human Services is required before application for University Graduate Scholarship will be considered.
2. All applicants are expected to pursue a full-time program of graduate study (15 hours encouraged).
3. Application for UGS should be resubmitted to the department by **February 15** each year for consideration for the following year.

Name _____ **Major** _____ **Degree Goal** _____

Address _____

Soc. Sec. No. _____ **Phone (H)** _____ **(W)** _____

E-Mail Address _____

State of Residency _____ **Marital Status** _____ **Dependents:** _____

Are you a U.S. Citizen? _____ **Race/ethnic origin** _____
If not, give type of visa held _____

Applying for: UGS (Tuition minus general fees) _____
GA (Tuition, fees, stipend) (no summer GA's) _____

Have you previously received a University Graduate Scholarship _____

If so, please indicate type: _____ **Date** _____

How many quarter(s)? _____

How many total graduate hours have you completed at UC (including any prior UC graduate work)? _____

Applicant Signature

Date

Advisor Signature

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SUMMER YEAR _____

Requirements:

1. Admission to a graduate program of study in the College of Education, Criminal Justice, and Human Services is required before application for University Graduate Scholarship will be considered.
2. All applicants are expected to pursue a full-time program of graduate study (15 hours encouraged).
3. Attach a financial statement including projected income and expenses for scholarship period.
4. Applications for UGS should be resubmitted to the department by **February 15** for consideration for the coming summer.

Name _____ Major _____ Degree Goal _____

Address _____

Soc. Sec. No. _____ Phone (H) _____ (W) _____

E-Mail Address _____

State of Residency _____ Marital Status _____ Dependents: _____

Are you a U.S. Citizen? _____ Race/ethnic origin _____
If not, give type of visa held _____

Applying for: UGS (Tuition minus general fees) _____
GA (Tuition, fees, stipend) (no summer GA's) _____

Have you previously received a University Graduate Scholarship _____

If so, please indicate type: _____ Date _____

How many quarter(s)? _____

How many total graduate hours have you completed at UC (including any prior UC graduate work)? _____

Applicant Signature

Date

Advisor Signature

UNIVERSITY OF CINCINNATI

**COLLEGE OF EDUCATION, CRIMINAL JUSTICE, AND HUMAN
SERVICES**

**DIVISION OF HUMAN SERVICES
COUNSELING PROGRAM**

FINANCIAL STATEMENT

(THIS FORM MUST ACCOMPANY THE SCHOLARSHIP APPLICATION)

SCHOLARSHIP PERIOD:

DATE _____

PROJECTED INCOME:

AMOUNT _____

EXPENSES:

AMOUNT _____