



## Veteran Services

UNIVERSITY OF COLORADO BOULDER

### ***Dependent Scholarship Application***

The University of Colorado Boulder Office Veteran Services Scholarship Committee will select the recipients based on the listed criteria.

#### **Award Package**

- A \$1000 general scholarship for 2017-2018 school year (annual, not renewable)

#### **Criteria for Acceptance**

- Military dependent using Chapter 35, DEA benefits.
- A cumulative Grade Point Average of 2.75 or higher.
- Accepted as a degree seeking undergraduate or graduate student at CU Boulder.
- Completed at least one full-time semester at CU Boulder before Fall 2017.
- Proof of Chapter 35 benefits on file with Office of Veteran Services.
- Completed CU Boulder Veteran Services Dependent Scholarship Application.

#### **Packet**

- Completed CU Boulder Veteran Services Scholarship Application form.
- A minimum 300 word essay explaining how your completion of a degree at CU will benefit your community. Please submit a Word Documents to [stewart.elliott@colorado.edu](mailto:stewart.elliott@colorado.edu).

***The entire application package must be returned via email, fax or US mail no later than June 30, 2017.***

E-mail: [stewart.elliott@colorado.edu](mailto:stewart.elliott@colorado.edu)

Fax: (303) 492-1880

Telephone: (303) 735-3028

Office of Veteran Services  
University of Colorado Boulder  
Center for Community Room S482  
UCB 120  
Boulder, CO 80309-0031



Veteran Services

UNIVERSITY OF COLORADO **BOULDER**

## ***Dependent Scholarship Application Form***

### **Applicant Information**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I.: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apartment/Unit # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Student ID: \_\_\_\_\_

### **Education**

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate: Yes ☐ No ☐

Degree/Major: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate: Yes ☐ No ☐

Degree/Major: \_\_\_\_\_

Do you have a cumulative Grade Point Average of 2.75 or higher? Yes \_\_\_\_\_ No \_\_\_\_\_