SCAD®

ATLANTA · eLEARNING · SAVANNAH

# APPLICATION *for* SCHOLARSHIP *or* FELLOWSHIP

**(Optional. Not required or considered in admission decision.)**

Applicant's full legal name: *(please print or type clearly using blue or black ink)*

FIRST (GIVEN) NAME | MIDDLE NAME | LAST (FAMILY) NAME

Social Security No. or SCAD Student Identification No. | Birth date *(month/day/year)*

**First-time freshman or transfer student**

Name of high school

Overall high school GPA | SAT score | ACT score

**College/university student or graduate**

Name of college attended | GPA

Name of college attended | GPA

Name of college attended | GPA

Name of college attended | GPA

**Achievements/Special Needs**

Describe or list in 50 words or less, special financial needs or outstanding academic or artistic achievements to explain why you are applying for a scholarship or fellowship.