

Solko & Olliff Family International Student Scholarship Application

Fort Hays State University

Today's Date	FHSU ID OR Social Security #
FAMILY Name	GIVEN Name
Current Mailing Address (street address, city, state, zip)	
Classification ___ Freshman ___ Sophomore ___ Junior ___ Senior ___ Graduate Student	
College Major	Current GPA
Expected Graduation Date	Degree you will receive
Expected date you plan to return home (month & year)	
**Please provide an FHSU transcript and attach to application	
Please write in the space below an essay telling why you are applying for the Solko & Olliff Family International Scholarship, what your future plans are, and why you should be awarded this scholarship.	

For Office Use Only

____ eligible ____ fin need ____ GPA ____ deny ____ accept