

METCALF ENDOWMENT

Application

Last Name: _____ First Name: _____ ID #: _____

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By signing this application form the applicant confirms that she is a UWW student who will be a junior or senior at the time of the award. The applicant's signature also indicates that she is aware that in the event that she voluntarily discontinues her UWW education or fails to remain in good academic standing (minimum GPA of 3.0), she forfeits her right to the scholarship and monies shall revert back to the scholarship fund.

Applicant signature: _____

Date: _____