





PROMISE ENDOWMENT

Application

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ ID #: \_\_\_\_\_

Page 3 of 3

*By signing this application form the applicant confirms that s/he is a UWW student who comes from a large metropolitan area and has demonstrated financial need. The applicant's signature also indicates that s/he is aware that in the event that the scholarship recipient voluntarily discontinues his or her UWW education or fails to remain in good academic standing, s/he shall forfeit his or her right to the scholarship and monies shall revert back to the scholarship fund.*

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_