



## Returning Student Scholarship Application Form

*(Please complete in full)*

Name

STU ID

Major(s)

Minor(s)

Year of study for upcoming academic year

1    2    3    4

Were you accepted to St. Thomas University as an adult learner?

Yes    No

Home Town

Home Province

**ANY SCHOLARSHIP(S) YOU CURRENTLY HOLD**

**SCHOLARSHIP(S) FOR WHICH YOU ARE APPLYING**

Any scholarship for which I am eligible

Summer Mailing Address

Street Number and Name

City

Province

Postal Code

Phone Number

STU Email

Please attach a brief summary of your educational background, other awards and accomplishments and extracurricular activities. If you are applying for specific scholarships please describe why you feel you would be an ideal candidate to receive that award.

Applicant's signature

Date