WESTERN ILLINOIS UNIVERSITY

WIU G. Allan Laflin /Alumni Council Legacy Scholarship Application

Deadline: March 30th at the Alumni House by 4:30 p.m.

Student's Name _____

Student's Home Address _____

City _____ State _____ Zip _____

Student's Campus Address _____

Student's Campus Phone _____ E-Mail _____

Cumulative GPA _____ Total Number of Semester Hours Earned _____

Number of Hours Earned at WIU _____ Major _____

To be considered, this section must list a parent who is a WIU Graduate.

Please provide the name and graduation year of a parent who is a graduate of WIU:

_____

List your involvement and/or memberships in University organizations and programs:

List leadership positions held in department, college, and/or organizations:

Honors and notable accomplishments:

List two University references (include name, title, address, and phone number):

Return in person to: Alumni House, 1009 W. Adams, Macomb, IL 61455
Return by mail to: Alumni House, 1 University Circle, Macomb, IL 61455