



**PROFESSOR FRAN JABARA  
ENDOWED SCHOLARSHIP**

**APPLICATION 2009**

**Section I: Personal Information**

<b>Legal Name</b>	Last Name (please print)	First Name	Middle Name	<b>Social Security Number</b>
<b>Address</b>	Number/Street	City	State	Zip
<b>Email Address</b>		Phone number	<input type="checkbox"/> Male    Sex <input type="checkbox"/> Female	Date of Birth
<b>Permanent Address</b>	Number/Street	City	State	Zip
<b>Parent Name(s)</b>	Last Name (please print)	First Name	Middle Name	
<b>Permanent Address (if different)</b>	Number/Street	City	State	Zip
<b>Hometown newspaper</b>				

**Section II: Academic information**

<b>Anticipated undergraduate academic major(s)</b>			
<b>Educational History: List all high school(s) or college(s) attended</b>			
School/College	City/State	Dates attended	Graduation Date/ Degree or Diploma

**Section III: Leadership Resume**

<b>School Activities: List all high school activities (including sports) in which you have participated.</b>		
Activity	Years of participation (9,10,11,12)	Office(s) held

Activity	Years of participation (9,10,11,12)	Office(s) held

**Community Activities: List all community-based activities (church, volunteer groups, etc) in which you have participated during high school.**

Activity	Years of participation (9,10,11,12)	Office(s) held

**Honors and Awards Received: List any honors and awards you have received as a result of your high school academic or extra-curricular activities.**

Activity	Year(s) received

**Employment Activities:**

Are you currently employed?  Yes  No      If yes, hours worked per week: \_\_\_\_\_

Employer	Years worked	Position

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## Essay

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Please write an essay (no more than two pages in length, double-spaced, using a 10 or 12 pt. font) on one of the following topics:

1. Looking back, describe an event which has had a lasting impact upon your life.
2. Given completion of your college education, where do you aspire to be professionally in five years?

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## Certification - To be signed by all applicants

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I have read and understand the enclosed information. I affirm that the information provided on this application form and any additional material that I submit related to the financial aid process is complete, accurate, and true to the best of my knowledge. I also understand that furnishing false information may result in the revocation of any financial aid.

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**Applicant's signature**

**Date**

By **January 23, 2009**, return your completed application to:

Sharon Mock  
Center for Entrepreneurship  
1845 Fairmont  
Wichita State University  
Wichita, KS 67260-0147