## APPLICATION FOR PHI DELTA GAMMA SCHOLARSHIP

Nam	ne:							
	Last	First		Middle initial				
NUII	D#:	-						
Add	ress:							
	Address	City	State	Zip				
A.	Please provide the following info	rmation:	Application Date	2:				
-	1. Number of graduate hours you ha	ave completed at the	time of applica	ation (minimum of 9):				
2	2. Graduate Major:							
3	. List the courses you intent to take each semester.							
	Course Number(s) and Title(s):							
	Fall:		_					
	Spring:							
hour	se note: Awards are 'per semeste s per semester to be eligible to re irement may be waived in the ser	ceive an award. Th	ne minimum p	er-semester credit hour				
В.	Please tell us about yourself:							
	Organizations to which you belong and offices held (if any):							

Why do yo	ou desire the sch	olarship?			
Are there	any other comm	nents you migh	t wish to make?	?	
ant Signat	ure:				

Please submit your completed application by e-mail to:

gradschool@unomaha.edu

or by mail to:

UNO Office of Graduate Studies 6001 Dodge Street Eppley Administration Building, Room 108 Omaha, NE 68182-0209