The University of KANSAS

Transfer Students
Coca-Cola Scholarship for Children of KU Faculty and Staff

Priority scholarship deadline: June 1, 2013

If you indicated on your “Undergraduate Application for Admission” that you are a dependent of a KU employee and also included your parents name and department of employment that information is sufficient for you to be considered for this scholarship. You need to submit this application form ONLY IF YOU DID NOT indicate on the Admission application that you are a dependent of a KU employee. Submit completed application to the University of Kansas, Financial Aid & Scholarships, KU Visitor Center, 1502 Iowa, Lawrence, KS 66045

- Official transcripts from all postsecondary institutions you have attended must be on file with the Office of Admissions.

Applications received after the priority deadline (June 1, 2013) will be reviewed based on available funding.

Note: Applications must be complete in order to be reviewed.

1. Applicant Information:

<table>
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<th>Legal Name:</th>
<th>Last</th>
<th>First</th>
<th>Middle</th>
<th>Other</th>
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Social Security Number: [ ] Female [ ] Male

Birth date: / / 

Applicant’s mailing address: Street City and State Zip code County, if Kansas

Home phone: Area code and phone number E-mail address

2. Parent or Guardian Information (required):

Name of KU-employed parent(s) or guardian(s) Relationship List KU Campus or KU Affiliate AND Department of Employment

Parent/guardian home address: Street City and State Zip code

Benefits Eligible KU Employee? [ ] yes [ ] no [ ] Faculty Member [ ] Unclassified Staff [ ] Classified Staff

Benefits Eligible Employee of KU Affiliate? [ ] yes [ ] no [ ] Faculty Member [ ] Unclassified Staff [ ] Classified Staff

3. Citizenship:

Are you a U.S. citizen? [ ] yes [ ] no If “no”, are you a permanent resident? [ ] yes [ ] no

4. Enrollment information:

Semester of initial KU entry: Expected KU graduation date: 

5. Please check here if you attend any classes at KU Medical Center

Certification Statement and Signature:

I certify that this information is correct and complete, and I understand that any omission or misrepresentation of this information may invalidate this application.

Student signature Date 

Signature of KU-employed Parent or Guardian Date