Attention Seniors!!

Dr. James Allan Scholarship Application for 2017

The Dr. James Allan Scholarship is an annual award given to an outstanding Geneseo senior(s) who has made exceptional contributions to student life. Preference will be given to applicants who intend to pursue graduate study in higher education, student personnel or school counseling. This year there will either be one $1500 award or two $750 awards.

Dr. James Allan retired in 1997 after 34 years of service to SUNY Geneseo. Throughout his lengthy tenure, Dr. Allan served as a counselor, mentor, advisor and friend to hundreds of Geneseo students. On the occasion of his retirement, the Dr. James Allan Scholarship was created in his honor. The scholarship is supported by many of Dr. Allan’s friends, former students, and colleagues.

Application Deadline: March 24, 2017

Questions? Contact: Dr. Sancilio, Chairperson
Dr. James Allan Scholarship Committee
Dean of Students Office, CU 354
Dr. James Allan Scholarship
2017 Scholarship Application

Please submit your application and a statement of recommendation no later than **March 24, 2017**, to Dr. Sancilio, Dean of Students Office, 1 College Circle, Geneseo, NY 14454. Applications are being accepted from students graduating in May or August of 2017.

**PLEASE PRINT CLEARLY**

Name_________________________________________ Geneseo ID# ________________________

Last First Middle Init.

Home Address _____________________________________________________________

#Street City State Zip Home Phone__________________________

College Address _____________________________________________________________

#Street City State Zip Cell Phone__________________________

Class Year  _ Fr.  _ Soph.  _ Jr.  _ Sr.  E-mail Address________________________________________________________

Major(s) __________________________________________ Hometown Newspaper________________________________________

**Personal Statements:** Please provide a concise and well-written response to each of the following questions. **Your responses must be typed, and total no more than a total of two pages, single-spaced, and attached to this application. Do not attach a resume.** Submission of a co-curricular transcript is encouraged.

**Academic Achievement**

1. Cumulative College Grade Point Average ____________

2. List the academic awards or honors you have earned.

**Contributions to College Life**

1. List the extracurricular activities in which you have been actively involved in the past two years and identify your role in each activity.

2. Describe your most important contributions to those activities and the impact they have had on college life.

**Future Plans**

1. Identify the career area that is of greatest interest to you at this time. Explain why you are interested in this area.

2. What are your immediate plans after graduation?
Allan Scholarship  page 2

Applicant Name:____________________________________

Statement of Recommendation

Indicate below the name of the individual who will be submitting a statement of recommendation on your behalf. Statements must be received no later than March 24, 2017.

__________________________________________________________________________

Financial Aid Information

1. Which type(s) of financial aid are you currently receiving?
   __ Student Loan(s)       __ College Work Study       __ Pell Grant       __ TAP
   • Other ___________________________________________________

2. Do you hold a part-time job or paid internship during the academic year? _ Yes _ No
   If yes: Position ____________________________________________ Number of Hours Per Week _______
            Employer ____________________________________________ Supervisor _______________________
   _____________________________________________________________________________________

I understand that if I am selected to receive the James Allan Scholarship, my signature below authorizes the release of this application information to the scholarship sponsor.

__________________________________________________________________________

_______________________________________________
Signature

______________________________________
Date
APPLICANT NAME
The above candidate is applying for a scholarship to be awarded by the Geneseo Foundation. Selection is primarily based on contributions to student life. Preference will be given to a graduating student who intends to pursue graduate school in student personnel services, higher education administration or school counseling. Please submit this recommendation form by March 24, 2017 to Dr. Sancilio, Dean of Students Office, College Union 354, 1 College Circle, Geneseo, NY 14454.

How long have you known the applicant?

__________________________________________________________________________________

In what capacity?

__________________________________________________________________________________

Please rate (5= outstanding; 1= poor) the applicant in the following categories relative to other students you have known.

<table>
<thead>
<tr>
<th></th>
<th>5</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic achievement:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal motivation and direction:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contribution to college life:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrated leadership abilities:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall rating:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments: (Please note: you may attach a separate sheet if you prefer.)

__________________________________________________________________________________

Signature__________________________________________________________

Name_____________________________________________________________

Title______________________________________________________________

Address____________________________________________________________________

Office Phone ___________________________ Home Phone__________________________