

Dr. Patricia Robertson Scholarship Award Application

SCHOLARSHIP FORM

Student Name:

E Number:

Email Address:

Current Cumulative ETSU GPA:

Scholarship applications must demonstrate one or more of the following. Please check all boxes that apply:

- Active participation in one or more campus/department/College organizations that focus on diversity and equity
- Creates opportunities for peers to engage in conversations and/or activities that are focused on diversity or equity
- Demonstrates a commitment to creating an inclusive community at ETSU through contributions to diversity, equality, or inclusion initiatives
- Identifies, acknowledges, and rewards individual and team/unit actions that promote access, diversity, and inclusion

Name of Reference	ETSU Office/Department	Email Address	Campus Office Number
#1.			
#2.			

On the next page, respond to the following question (limit: 2000 words)

“Why should I be selected to receive the Dr. Patricia Robertson Scholarship Award?”