



LELA WINEGARNER SCHOLARSHIP

Application Form (for International Students)

Graduate School 208 Hovey Hall Campus Box 4040 Normal, IL 61790-4040 Telephone: (309) 438-2583 GraduateSchool@ilstu.edu

Awarded to promising international students who are pursuing careers of service to their country. The Selection Committee will evaluate the applicants' demonstrated scholarship and potential for using their education in a service capacity in their native country. All international students admitted to Illinois State University Graduate School programs whose career objectives meet the above criteria are eligible. The amount of each fellowship shall be determined by the Selection Committee in accordance with available funds. Recipients will be known as "Lela Winegarner Fellows." The award decision shall be made by a selection committee appointed by the Graduate School. Receipt of this award may impact other financial aid that a student receives.

Instructions: There are two sections to this application. Read and complete both sections of the application. Submit application and supporting materials listed below no later than September 15 (If the 15th falls on a weekend, the Monday after the 15th will be the due date.)

Section 1.	Student Inform	ation			
Name:		_			
Home Address:	Last	First	Middle	UID	ISU Email
Local Address:	Street	City	Country	postal code	Phone Number
_	Street	City	State	Zip code	Phone Number
Major area	of study:		Degree (chec	ck one): Master's 🗌	MFA SSP Doctorate
Expected D	ate for completion	on of the degree: _			
Section 2.	Supporting Info	ormation			
	Statements. Ap	plicants submit thre	ee separate statem	nents of no more tha	n 250 words eachone on
a. Acade b. Careei c. Financ	goals.	e.g. awards and re	cognition received		
				ved in the Graduate ation letters are rece	School no later than September 19 ived on time.
	rs must be sent b		ectly to, dddavid@i	Istu.edu, with the su	bject line: WINEGARNER
At least o country.	ne letter must co	ome from someone	who can address	the applicant's futur	e career of service to the home
Name of 6	each person fron	n whom letters of re	ecommendation ha	ave been requested.	
					<u> </u>
					<u> </u>
					<u></u>
Sig	nature of Applica	ant		Date	

Note: Official transcripts and standardized test scores will be secured by the Selection Committee. Applicants do not need to submit copies.