



**Mildred H. Hollinshead Memorial Scholarship  
Columbus State University  
College of Education and Health Professions**

The Mildred H. Hollinshead Memorial Scholarship will award funds each year to support educational expenses associated with enrollment in a Teacher Education Initial Certification Program offered by the CSU College of Education and Health Professions. The amount of the scholarship award(s) will be determined annually based on the availability of funds and the number of qualified applicants.

**Requirements:**

- ⊕ Applicants must be students accepted into an undergraduate teacher education program OR graduate (MAT) students accepted into an English teacher education program.
- ⊕ Priority will be given to African-American female students age 25 or older
- ⊕ Applicants must be admitted to Teacher Education and be in good standing with Columbus State University and Teacher Education.

**Instructions:**

- ⊕ Complete and return this application along with a one-page essay describing how the scholarship would benefit you **and** your community
- ⊕ Complete the Free Application for Federal Student Aid (FAFSA) for the appropriate academic year listing Columbus State University (school code 001561). The Columbus State University Financial Aid Office must receive the results of the FAFSA by the scholarship deadline. Please allow 3 to 4 weeks for processing of the FAFSA by the Department of Education.
- ⊕ Applicants must be accepted as a regularly admitted student to Columbus State University by the scholarship deadline.

Submit all of the above to the Columbus State University CQTL Office, 4225 University Avenue, Columbus, GA 31907-5645 or Frank Brown Hall, Rm. 2068 by the scholarship deadline – **Jan. 31**.

**PLEASE PRINT OR TYPE INFORMATION**

Student's Name \_\_\_\_\_  
Last First MI

Permanent Address \_\_\_\_\_  
Number, Street, and Apartment Number

City State Zip Code

CSU ID Number \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ mm dd yy

State of Residence \_\_\_\_\_ County of Residence \_\_\_\_\_

Home Telephone Number (\_\_\_\_) \_\_\_\_\_ Work# (\_\_\_\_) \_\_\_\_\_

Major \_\_\_\_\_ Grade Level \_\_\_\_\_ Expected Graduation Month/Year \_\_\_\_\_

Place of Employment \_\_\_\_\_ Position \_\_\_\_\_

Have you applied for any other form of financial aid? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, list sources and amounts: \_\_\_\_\_  
\_\_\_\_\_

List extracurricular activities of the last three years:

Activity	Date	Description

List honors received while in high school or college:

Name of Honor	Date	Description

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date