



UNIVERSITY of
DENVER

ARTS, HUMANITIES
& SOCIAL SCIENCES

Publishing Institute

PUBLISHING INSTITUTE 2016 SCHOLARSHIP APPLICATION

Please complete the following to be considered for a Publishing Institute scholarship. Completed applications must be sent to the Publishing Institute and postmarked by **March 22, 2016**. Priority consideration for scholarship funds will be granted to those applying for early acceptance. Those applications must be postmarked by **February 23, 2016**. As financial need is the primary consideration for our scholarships, we do ask that you fill-out as much of this form as is applicable to your situation. This information is seen only by our selection committee and will be kept absolutely confidential. The information provided here will have no bearing on your general application for admission.

Last Name	First Name	Middle Name	Birth name or previous legal names
Social Security Number		Birth date (MM/DD/YYYY)	

Present Address	Mobile Phone Number:
Permanent Address	Home Telephone Number:
E-mail Address	

What was your taxable income for 2015? _____

What is your taxable income for 2016, year-to-date? _____

Assets		Liabilities		
Checking:		Educational Loans:		
Savings:		Other Loans:		Please describe:
Trusts:		Credit Cards:		
Real Estate:		Other Debts:		Please describe:
Total:		Total:		

Will you be receiving any assistance from a third party (parents, tribe, business, etc.)? If so, please describe and include amount here.

Total scholarship amount you are seeking for this course: _____

If there is any additional information that impacts your ability to pay for this program that was not included above, please describe it here. You can attach an additional page, if needed.

Certification Statement: I understand that this application and all credentials included for my admission file are confidential and become the property of the University of Denver. These documents will not be returned, copied or released to any person(s) or myself. I certify that the information given in this application is true and complete without evasion or misrepresentation. I understand that willful omission, falsification or incomplete statements within this application may result in a denial of admission, dismissal, or forfeiture of scholarship.

Applicant's Signature _____ Date _____

Submit this application as a supplemental document in the online admissions system or send application to:

Office of Graduate Studies
Mary Reed Building
Room 5
2199 S. University Blvd.
Denver, CO 80208
Phone: 303-871-2706
Email: gradinfo@du.edu

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