



FERRIS STATE UNIVERSITY

College of Arts and Sciences

VIRGINIA MILES SHEPLER ANNUAL SCHOLARSHIP

APPLICANT INFORMATION

Last Name: _____ First Name: _____

Student ID#: _____ E-Mail: _____

Address: _____ City: _____ State: ___ Zip: _____

Academic Program _____ Current GPA: _____

By submitting this scholarship application I hereby authorize Ferris State University to disclose confidential information about my financial aid status or academic records to my scholarship donor. This information may include, but may not be limited to, intended major, academic standing, home town, and information related to scholarship requirements.

I consent that this release will remain in effect until revoked by me in writing.

CRITERIA

- Full-time undergraduate in the Honors Program majoring in pre-pharmacy, pre-medicine or pre-optometry
- 3.25 GPA at the time of application
- Preference given to students who demonstrate financial need
- Complete the FAFSA (Free Application For Student Aid)

SUBMIT ELECTRONICALLY

- A 600-700 word essay explaining why you are the best candidate for this scholarship

SCHOLARSHIP AMOUNT AND DEADLINE

- Scholarship amount varies; recipients may apply for renewal
- Application deadline is April 30th

SUBMIT ALL DOCUMENTS ELECTRONICALLY TO THE ADDRESS LISTED BELOW

driggerg@ferris.edu (Gayle Driggers)