



SIU Graduate School
Graduate Scholarship Program
Application

Purpose: The purpose of the SIU Graduate Scholarship Program (GSP) is to provide a 1/3 tuition waiver **to academically outstanding graduate students who have been admitted into their first semester of a graduate program for the remainder of that academic year.**

**This form must be completed and signed by the student's academic department.*

**If awarded, an application must be completed and submitted each semester of the awarded academic year.*

*(Check with your academic program for eligibility **BEFORE** applying. Some programs may limit the number of tuition waivers awarded.)*

Semester _____ Year _____ # of Credit Hours Waived (attach student's registration) _____

Name _____ Dawg Tag # _____
Last First Middle Initial

Mailing Address _____
Street City State Zip

SIU Email _____ Phone _____

Degree Sought: Masters Doctoral Name of program _____

Print Name _____
Department Chair or Director of Graduate Studies Signature

Signed _____ Date _____
Department Chair or Director of Graduate Studies Signature

I declare under penalty of perjury that the foregoing is true and correct. I am fully aware that any intentional falsification of information contained herein may result in the denial of the application or loss of aid currently being received. I realize furthermore that this scholarship will be revoked if I fail to meet the designated requirements of being enrolled in a graduate degree program and carrying 9 hours of graduate credit during the fall and spring semester, 6 hours of graduate credit during the summer session, or if I receive any other type of a tuition scholarship.

As an applicant for a tuition or fee waiver award from Southern Illinois University, I understand that the University has the legal authority to release my name and address, the name of my former high school or college, the name of my award, and the award amount. This release is valid for the period of time the tuition waiver is in effect. All renewals of future tuition waivers are subject to GAU guidelines and department needs.

Signed _____ Date _____
Student's Signature

FOR GRADUATE SCHOOL USE ONLY

Term awarded: _____

Return completed application to:
 Graduate Assistantship/Fellowship Office
 Graduate School; MC 4716
 Southern Illinois University
 Carbondale, Illinois 62901-4716

Deadline Dates:
 FALL SEMESTER – AUGUST 25
 SPRING SEMESTER – JANUARY 5
 SUMMER SEMESTER – MAY 1