

Application for a James T. Shipman Scholarship in Physics and Astronomy at Ohio University

Name _____ S.S.# _____

Address _____
Number Street City State Zip

Telephone (____) _____

Scholarship Applied For:

High School _____

Open Scholarship

Address _____

Scholarship for Minorities
and Woman (state which
minority group)

Names and Addresses of Three References

Physics teacher _____

Mathematic teacher _____

Other _____

Signed _____ Date _____

Please have the reference letters sent to the address below. A high school transcript and ACT or SAT scores are also required. *

A single-page, signed and dated statement from the applicant of his or her reasons for wanting to enter into preparation for a career in physics or astronomy must accompany this application.

Send documents to: Scholarship Committee Chair
 Department of Physics and Astronomy
 Ohio University
 Clippinger Research labs
 Athens, Ohio 45701-2979

APPLICATION DEADLINE ³/₄ FEBRUARY 15

* If you have already sent these documents with application to Ohio University, please indicate below. (Click applicable item boxes.)

I have applied to: Arts and Science College Honors Tutorial College
 including: Transcript Letters of Recommendation Test Information