UNIVERSITY OF NEBRASKA AT OMAHA WRITER'S WORKSHOP Scholarship Application

For Incoming Students

DEADLINE: First Monday of March at 5 p.m.

Please complete this form and return it along with **two (2) letters of recommendation and supporting materials** (see back of form). At least one letter must be from an English, creative writing, or journalism teacher who has worked with you and knows your writing. Students transferring from another college should also include a copy of their transcripts or degree audit. Return all materials to:

College of Communication, Fine Arts and Media
Department of Writer's Workshop Scholarship Committee
University of Nebraska at Omaha
WFAB 315
6001 Dodge Street
Omaha, Nebraska 68182-0189

Students *must be* **ADMITTED** *to the College of Communication, Fine Arts and Media* as a **CREATIVE WRITING major to be eligible** for Writer's Workshop scholarships.

Address		Phone	
City	State_		Zip Code
e-mail		Nebraska r	resident? Yes / No
Current School			
High School (if different from above			
Anticipated first semester at UNO: Check appropriate spaces:	Fall	Spring	Summer 20
I have been admitted I have applied to UNC			
Please complete the following (use	separate sheet	t if necessary).	
What accomplishments distinguish y (Include school or other activities, chave participated)			
List honors or awards you have rece	eived.		

Please complete the information on the back of the form.

S -	scholarship.			
- -	Please indicate your major area of interest:			
	Writer's Workshop Majors			
	Fiction Poetry Creative Non-Fiction			
	Submit copies of 4-5 original poems or 20-40 pages of your own fiction or nonfiction writing with this application. Work will not be returned.			
	DEADLINE for SUBMISSION: First Monday of March at 5 p.m.			
_	If you are the recipient of a scholarship, you will be contacted by mail.			
b	e completed by High School Guidance Counselor:			
	This student has a G.P.A. of on a scale,			
	and ranks out of in his/her class.			
	This student received a composite ACT score of			
	Test taken as a Junior or Senior.			

OR Current College Advisor:

This student has a cumulative college G.P.A. of ______

ACT composite score: ______, taken in the year ______.

and has completed _____ quarter/semester (circle one) hours of college credit.

Name_____Title_____

Signature______Date_____

List any other information you think would be helpful in determining your eligibility for a

Revised 1/11