

APPLICATION FORM

Friends of the Oberlin College Library Graduate Library School Scholarship

Last Name: _____ First Name: _____ Middle Initial: _____

Primary Mailing Address: _____

Permanent Home Address (if different from above): _____

Social Security Number: _____

Racial / Ethnic Background: _____

Note: In awarding the scholarship, some preference is given to candidates from diverse racial and ethnic groups.

Library Schools

Please list the masters degree programs in library and information studies to which you have applied. It is not necessary for you to have received notice of acceptance at the time of application, although you must have been formally admitted to and enrolled in a program in order to receive the scholarship.

Institution One: _____

Institution Two: _____

Institution Three: _____

Institution Four: _____

Educational Information

Please list all colleges, universities, graduate and professional schools at which you have earned credit.

Institution: _____

Dates Attended. From: _____ To: _____

Major: _____ Degree: _____

Institution: _____

Dates Attended. From: _____ To: _____

Major: _____ Degree: _____

Institution: _____

Dates Attended. From: _____ To: _____

Major: _____ Degree: _____

Work Experience

Institution/Organization: _____

Title: _____

Nature of Work: _____

Date of Employment. From: _____ To: _____

Institution/Organization: _____

Title: _____

Nature of Work: _____

Date of Employment. From: _____ To: _____

Institution/Organization: _____

Title: _____

Nature of Work: _____

Date of Employment. From: _____ To: _____

Honors or Awards

Participation in honors society or professional organizations, as well as any awards, scholarships, prizes, honors, or class offices:

Leadership Skills

Please describe briefly your leadership skills as demonstrated, for example, through community, civic, organizational, or volunteer experiences.