

**ACGS SCHOLARSHIP APPLICATION**

**Applications must be postmarked by April 1, 2017**

**Applications received after the above date will not be accepted.**

**Mail to: Richard M. Greer, PhD  
615 Tulip Drive  
Bowling Green, KY 42104**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Parent/Guardian Name, Address & Phone number, if different from above:** \_\_\_\_\_

**Lineal MacGregor ancestor's name and relationship: (i.e. Mary MacGregor Smith, great grandmother/Joseph MacGregor Jones, deceased husband. Also use septs if applicable.)** \_\_\_\_\_

**Name and address of high school or post-secondary institution last attended:** \_\_\_\_\_

**GPA:** \_\_\_\_\_ **SAT/ACT/GRE or other score:** \_\_\_\_\_

**Name and address of school/college/university for which educational assistance is being requested:**

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**Year entering: \_\_\_ Freshman \_\_\_ Sophomore \_\_\_ Junior  
\_\_\_ Senior \_\_\_ Graduate**

**Major course of study if determined: \_\_\_\_\_**

**Please attach with this application:**

- 1) a cover letter in which you introduce yourself. Include any academic honors/awards, activities, memberships, honor classes, community/civic involvement, significant employment, etc.**
- 2) three letters of recommendation, one of which must be from someone other than a teacher,**
- 3) notice of acceptance at post-secondary institution to which applying or attendance at current post-secondary institution.**

**REMEMBER:**

- 1) Scholarship recipients must maintain at least a 2.0 undergraduate GPA or a 3.0 graduate GPA while receiving educational assistance.**

**2) Scholarship recipients must forward in writing to the Chair of the Board of Trustees an academic progress report at the end of each semester. This report may be an unofficial transcript.**

**3) Scholarship recipients must sign a consent to release educational information, within the limits of the Family Educational Rights and Privacy Act (FERPA). The signature below is evidence of giving such consent.**

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_