

# BYU INDEPENDENT STUDY

LAST NAME	FIRST NAME	MIDDLE/MAIDEN
ADDRESS	CITY	STATE
( )		ZIP CODE
TELEPHONE	EMAIL	BIRTH DATE

PLEASE INDICATE THE TYPE OF SCHOLARSHIP YOU ARE APPLYING FOR

<input type="checkbox"/> Academic Scholarship	<input type="checkbox"/> Mabel Brown Scholarship
<input type="checkbox"/> Financial Need Scholarship	(Please note that you may only apply for <b>one</b> type of scholarship per application period)

CHECK ALL THAT APPLY

<input type="checkbox"/> Male	<input type="checkbox"/> Single	<input type="checkbox"/> Freshman ( 1–32 Cr. Hrs. )	<input type="checkbox"/> Undergraduate
<input type="checkbox"/> Female	<input type="checkbox"/> Married	<input type="checkbox"/> Sophomore ( 33–64 Cr. Hrs. )	<input type="checkbox"/> Graduate (with bachelor's degree)
<input type="checkbox"/> LDS	<input type="checkbox"/> Widowed	<input type="checkbox"/> Junior ( 65–96 Cr. Hrs. )	<input type="checkbox"/> Non-degree-seeking
<input type="checkbox"/> Non-LDS	<input type="checkbox"/> Divorced	<input type="checkbox"/> Senior ( 97+ Cr. Hrs. )	<input type="checkbox"/> Certification (area) _____
Citizenship _____		<input type="checkbox"/> Advanced Standing (have bachelor's degree)	

### Mabel Brown Scholarship

The Mabel Brown Scholarship is awarded to single adults with a chronic physical handicap, disability or medical condition, limitation, or illness who maintain a 2.7 GPA.

To apply for consideration of the Mabel Brown Scholarship, please initial here to attest that you are single and have a chronic physical handicap, disability, or medical condition, limitation, or illness.

[ ] I am single.

[ ] I have a chronic physical handicap, disability, or medical condition, limitation or illness.

### ACADEMIC INFORMATION

Have you applied before for BYU Independent Study scholarship? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you been awarded BYU Independent Study scholarship before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Are you **currently** a BYU matriculated student? \_\_\_\_\_ GPA \_\_\_\_\_ (Please note: if you are **currently** enrolled at BYU, you are **not** eligible for the "More Excellent Way" scholarship. Please contact the BYU Financial Aid Office for more information regarding other scholarships that may be available to you).

Have you ever been to another institution of higher learning? \* \_\_\_\_\_ regarding other scholarships that may be available to you).

Name \_\_\_\_\_ GPA \_\_\_\_\_ Name \_\_\_\_\_ GPA \_\_\_\_\_

*\*Please attach transcript of credits for institutions of higher learning*

List any BYU Independent Study courses you may have completed and the grades you earned.

Course	Grade	Year Completed

List any BYU Independent Study courses you are currently enrolled in and indicate your progress.

Course	Number of Assignments Required	Number of Assignments Submitted

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INCOME INFORMATION

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List sources of income (If married, please include spouse's information.)

\_\_\_\_\_ Gross Yearly Income \$ \_\_\_\_\_  
\_\_\_\_\_ Net IRS Adjusted Income (AGI) \$ \_\_\_\_\_  
\_\_\_\_\_ Number of Dependents \_\_\_\_\_

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FAMILY INFORMATION AND PERSONAL GOALS (USE ADDITIONAL PAGE IF NEEDED)

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Please list all pertinent information regarding responsibility to family and possible support from family. Include circumstances that would be helpful in assessing your financial need. Explain your educational goals, how the scholarship can assist you with those goals, and how you plan to use your education in a spirit of "A More Excellent Way".

If you receive a scholarship, which course do you plan to take and how will it assist you in reaching your educational goals?

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If I receive a BYU Independent Study scholarship, I agree to use it to enroll in a course within two months of the award announcement, and I agree to follow all Independent Study procedures and policies. All the information on this form is true and complete to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_