FRED, MARIE, AND EDNA HUDSON SCHOLARSHIP

**RECIPIENT: STUDENT WITH A DISABILITY**

**Sponsored by: NDSU Development Foundation Academic Year 2016-17**

**PLEASE PRINT OR TYPE:**

NAME (Last Name, First Name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NDSU Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expected Graduation Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Enrolled in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_credits for fall semester

Circle Current Class Status:

Freshman Sophomore Junior Senior Graduate

**Please attach documentation for the following:**

Incoming High School Student: Current Cumulative High School GPA \_\_\_\_\_\_\_\_\_\_

 **OR**

Current/Transfer Student: Cumulative College GPA\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Disability Status at NDSU Obtained on (Date)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**On an attached SEPARATE SHEET, please answer the following questions using 150 words or less per question. Questions exceeding the limit will not be considered.**

1. Please identify your academic and career goals. Share the steps you are taking to achieve them.
2. Describe what “self-advocacy” means to you. Identify ways you will self-advocate at NDSU.