

# Franklin College Of Arts and Sciences

## Graduate Scholarship Application

This application may be used to apply for any of the graduate scholarships offered by Franklin College.

email this completed form to:

**Kris Petti**  
**pettik@uga.edu**  
**Franklin College Of Arts and Sciences**  
**Dean's Office**

Date:

Name:

UGA 81-#

UGA email address:

Local Address:

Phone Number:

Permanent Address:

Major:

Expected graduation date:  
(Term/year)

References:

1. Name:

Contact email:

2. Name:

Contact email:

**Certification Statement and Honor Code**

Are you currently, or have you ever been, charged with, or subject to, disciplinary action including suspension or expulsion for scholastic or any other type of misconduct at any high school, college, or university? Yes \_\_\_\_\_ No \_\_\_\_\_

If the answer to the previous question is yes, please explain.

Have you ever been charged with or convicted of or pled guilty or nolo contendere to a crime other than a minor traffic offense, or are any criminal charges now pending against you?

Yes \_\_\_\_\_ No \_\_\_\_\_

If the answer to the previous question is yes, you MUST submit a full statement of relevant facts.

“I will be academically honest in all my academic work and will not tolerate academic dishonestly of others. “ I understand that by signing this Application, I am subscribing to the above Honor Code. I understand that any material false statement made knowingly and willfully by me on this Application, or any supporting documents may, in accordance with O.C.G.A. 16-10-71, which provides that upon conviction, a person who knowingly commits the offense of false swearing shall be punished by a fine of not more than \$1,000 or by imprisonment for not less than one nor more than five years, or both, subject me to immediate dismissal from the institution. I further attest that all the information I have supplied on this Application is true to the best of my knowledge, that any omission of misrepresentation may invalidate further consideration, and that I have an obligation to update the information submitted to the University until I enroll.

By my signature, I hereby authorize UGA’s Student Financial Aid Office to release my financial aid information to the Franklin College of Arts and Sciences Scholarship committee.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_