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| C:\Users\ttrue2\Desktop\Biz Pubs\UW_COB_Logo1grey.png | University of Wyoming  College of Business  DECA Scholarships |

# DECA Scholarship Application DATE: \_\_\_\_\_\_\_\_\_\_

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date of Birth: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email: |  |

|  |  |
| --- | --- |
| Scholarship Applying for: |  |

## Education

|  |  |  |  |
| --- | --- | --- | --- |
| High School: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO |  |  |

## DECA Involvement

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Position Held |  | From: |  | To: |  |
| Position Held |  | From: |  | To: |  |
| Position Held |  | From: |  | To: |  |

## References

Please list your chapter advisors contact information.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Phone: |  |
| Email: |  |  |  |

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to a scholarship offer, I understand that false or misleading information in my application may result in loss of scholarship and ineligibility for future awards.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |