



Scholarship Office

P.O. Box 44050 • Lafayette, LA 70504-4050  
Office: (337) 482-6515

*Université des Acadiens*

TO: Senior Counselor

FROM: Adele M. Bulliard  
Director of Scholarships

DATE: September 20, 2019

**RE: UL Lafayette Scholarship Opportunities--Fall 2020**

Greetings from the University of Louisiana at Lafayette! I hope your summer has been productive and you have enjoyed some time for relaxation and reflection.

**Again this year, general University scholarships will be awarded through the admissions process. The deadline for achieving the qualifying ACT/SAT scores and GPA is January 31st, 2020.** Enclosed you will find information regarding scholarships which we award. You can also review this information on our website at <http://scholarships.louisiana.edu/>.

Because your school has a UL Lafayette Foundation Scholarship which is designated for your high school, I have enclosed an application for the scholarship(s). This scholarship is administered by the Scholarship Office. Please share this application with your students and let them know the deadline to apply is *January 31, 2020*. Decisions will be made by our Scholarship Committee and letters will be mailed to student recipients as the scholarships are awarded.

Please do not hesitate to call me directly if you have questions. My direct line is 337.482.6552; our office line is 337.482.6515.

Thank you for all you do to assist us in recruiting your excellent students to our school.

Have a great year!

# UL LAFAYETTE ACADEMIC SCHOLARSHIP APPLICATION



## George Stelly, Jr. Endowed Scholarship



for Breaux Bridge High School, Cecilia High School, and St. Martinville High School

Deadline: January 31, 2020

**ELIGIBILITY REQUIREMENTS:**

1. Must have an ACT composite of 23 or greater or SAT composite of 1130 or greater
2. Must have a 3.0 cumulative GPA
3. Must be admitted to the University of Louisiana at Lafayette
4. Must attend Breaux Bridge High School, Cecilia High School, or St. Martinville High School

**I. Personal Background**

Name: \_\_\_\_\_  
LAST FIRST MIDDLE INITIAL

Address: \_\_\_\_\_  
CITY STATE ZIP

Parish/County: \_\_\_\_\_

College Major: \_\_\_\_\_

ULID: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email: \_\_\_\_\_

Gender:  Male  Female (check one)

Ethnicity (optional): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

High School Graduation Date: \_\_\_\_\_

**II. High School Information**

School Name \_\_\_\_\_

School Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Counselor \_\_\_\_\_

Phone # ( ) \_\_\_\_\_

Zip \_\_\_\_\_ Parish \_\_\_\_\_

Phone # ( ) \_\_\_\_\_

**III. Academic Background (TO BE COMPLETED BY HIGH SCHOOL COUNSELOR)**

ACT Scores: English \_\_\_\_\_ Math \_\_\_\_\_ Read \_\_\_\_\_ Sci. Resn. \_\_\_\_\_ **COMP** \_\_\_\_\_ **Test Date** \_\_\_\_\_

High School GPA on 4.0 Scale \_\_\_\_\_

\_\_\_\_\_  
Signature of Principal/Counselor

\_\_\_\_\_  
Date

**Comments:**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

I understand my records will be available to donors and Scholarship committees. I give my permission for my records to be transmitted

**IV. Extra Curricular Activities**

**IMPORTANT NOTE: Additional pages of activities will not be considered.**

High School Clubs/Organizations  
(List up to 4)

Year(s) Participated  
FR SO JR SR

Leadership Positions Held-Appointed  
and/or elected offices, team captains, etc.  
(List up to 4)

Years(s) Participated  
FR SO JR SR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

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\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

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\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-

High School Band/Chorus/Orchestra/ Debate/Quiz Bowl/Sports (List up to 4)	FR	SO	JR	SR	Have you ever participated in:	Yes	No
1. _____	___	___	___	___	All-State Band/Chorus/Orchestra	___	___
2. _____	___	___	___	___	Boys/Girls State	___	___
3. _____	___	___	___	___	Hugh O'Brien Youth Foundation	___	___
4. _____	___	___	___	___	Louisiana Youth Seminar (LYS)	___	___
					Louisiana Association of Student Councils (LASC)	___	___
					Talent Search	___	___
					Upward Bound	___	___

**V. Financial Information**

Note: Several of the scholarships awarded consider a financial need factor in the selection process. To be considered for this scholarship, this section must be completed.

Parents: Father's Name: \_\_\_\_\_ Occupation \_\_\_\_\_ Work Phone # \_\_\_\_\_  
LAST FIRST

Mother's Name: \_\_\_\_\_ Occupation \_\_\_\_\_ Work Phone # \_\_\_\_\_  
LAST FIRST

Family Yearly Income \_\_\_\_\_ Father's Income \_\_\_\_\_ Mother's Income \_\_\_\_\_

Number of Brothers/Sisters (excluding yourself) residing at home \_\_\_\_\_ Number of Brothers/Sisters in college \_\_\_\_\_

**MAIL YOUR COMPLETED APPLICATION TO:**  
 UL Lafayette Scholarship Office  
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 Lafayette, LA 70504-4050  
 Ph: (337) 482-6515