



SIU Graduate School
Tuition Scholarship
Application

Purpose: The purpose of the SIU Graduate School Tuition Scholarship as designed by the Board of Trustees is to assist students who have attained high levels of academic achievement.

**This form must be signed by the student's academic department.*

**Draft Registration Compliance Statement must be signed by the student.*

**An application must be completed and submitted for each semester applying.*

*(Check with your academic program for eligibility **BEFORE** applying. Some programs may limit the number of tuition waivers awarded.)*

Semester _____ Year _____

Name _____ Dawg Tag # _____
Last First Middle Initial

Mailing Address _____
Street City State Zip

Email _____ Phone _____

Degree Sought: Masters Ph.D. Name of program _____

Signed _____ Date _____
Department Chair or Director of Graduate Studies Signature

Draft Registration Compliance Statement

I certify that I am not required to be registered with Selective Service because:

- I am female
- I am in the Armed Services on active duty (note: members of the reserves and the National Guard are not considered to be on active duty.)
- I have not reached my 18th birthday.
- I was born before 1960
- I am a permanent resident of the Trust Territory of the Pacific Islands or the Northern Mariana Islands.
- I am an international student (applicable only to State of Illinois funded programs).
- I am an incarcerated student.

OR I certify that I am registered with Selective Service.

I declare under penalty of perjury that the foregoing is true and correct. I am fully aware that any intentional falsification of information contained herein may result in the denial of the application or loss of aid currently being received. I realize furthermore that this scholarship will be revoked if I fail to meet the designated requirements of being enrolled in a graduate degree program and carrying 9 hours of graduate credit during the fall and spring semester, 3 hours of graduate credit during the summer session, or if I receive any other type of a tuition scholarship. All renewals of future tuition waivers are subject to GAU guidelines and department needs.

As an applicant for a tuition or fee waiver award from Southern Illinois University, I understand that the University has the legal authority to release my name and address, the name of my former high school or college, the name of my award, and the award amount. This release is valid for the period of time the tuition waiver is in effect.

Signed _____ Date _____
Student's Signature

FOR GRADUATE SCHOOL USE ONLY

Admitted to Program: _____ UG GPA _____ GR GPA _____

Return completed application to:
 Graduate Assistantship/Fellowship Office
 Graduate School; MC 4716
 Southern Illinois University
 Carbondale, Illinois 62901-4716

Deadline Dates:
 FALL SEMESTER – JULY 15
 SPRING SEMESTER – NOVEMBER 15
 SUMMER SEMESTER – APRIL 15