

**TEXAS SOUTHERN UNIVERSITY MUSIC ALUMNI
SCHOLARSHIP APPLICATION**

NAME OF APPLICANT _____
Last First Middle

GENDER: M __ F __ BIRTHDATE _____

I.D.# _____

SOCIAL SECURITY # _____

PRESENT MAILING ADDRESS _____
Apt.#

CITY STATE ZIP

PHONE NUMBER _____

MOTHER _____
Last First Phone

FATHER _____
Last First Phone

CLASSIFICATION _____ MAJOR _____

EMPHASIS _____ CURRENT SEMESTER HOURS _____

EMAIL ADDRESS _____

Please submit an official transcript with this application

DATE _____