## **DEADLINE: FEBURARY 1**ARKANSAS STATE UNIVERSITY DEPARTMENT OF RADIO-TV

## ARKANSAS FARM BUREAU MARVIN VINES SCHOLARSHIP APPLICATION

(Please Type)

Name:	Student ID #	
School Address:		
Local Telephone:	Cell	_ E-Mail
Parents' Names:		
Parents' Address:		
College Hours Completed	Hours Currently Enrolled at AS	U Overall GPA GPA in Radio-TV
RTV Emphasis Area:	Minor	r
When do you expect to gradua	ate?	
Extra Curricular Activities/Co	ommunity Involvement/Employment	
Special Achievements/Honors	s and Recognitions	
Are there other accomplishme	ents you wish the committee to consider	ler?
<b>.</b>	4 11 11 W W	
Do you expect to receive any	other scholarships: Yes No I	f so, describe:
I certify that the statements made in good faith.	ade by me in this application are true	and complete to the best of my knowledge and are
Signed:		Date:

On a separate page, in 500 words, describe the experiences that have influenced your decision to pursue a career in broadcasting and how these experiences will help you succeed in this career choice. Describe what separates you from others in the committee's awarding of this scholarship.

(Attach 500-word essay on separate page)