

The Walter W. Sessoms Scholarship

The Walter W. Sessoms Scholarship fund was established in December 2006 by the Robert W. Woodruff Library Board of Trustees and named in honor of Walter W. Sessoms, former Board member. Annual scholarships will be awarded to Atlanta University Center (AUC) students and Woodruff Library staff based on leadership potential, merit, financial need and academic achievement. AUC Robert W. Woodruff Library employees currently enrolled in higher education academic institutions are eligible to apply.

Eligibility criteria:

- Current graduate or undergraduate student of the AUC
- If an employee of RWWL, provide proof of enrollment in academic institution
- GPA 3.0 or higher
- Sophomore or higher classification
- Enrollment as full-time or part-time student

(Link to application)

Course of study:

Open to all disciplines. Some preference will be given to Economics, Business and Athletics.

Application deadline:

Award Amount:

October 31st – For Spring Semester Use

Up to \$1,250 (renewable – student may re-apply)

Scholarships available:

Maximum of 5 per academic year

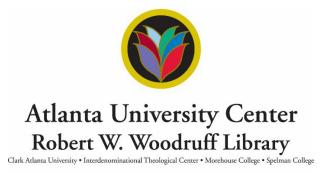
Selection and Notification:

The Selection Committee will review applications and select the most deserving recipients based on established criteria. Applications must be electronically received no later than the deadline date to receive consideration. Decision letters will be electronically sent to the successful applicants at least three weeks before the conclusion of the fall semester.

NOTE: All awarded scholarships will be listed in AUC and RWWL annual reports, scholarship booklets, on web sites and shared with the Sessoms family.

Scholarship Contributions:

Please make your tax-deductible contributions on Library website at www.auctr.edu or make check and money orders payable to: The Walter W. Sessoms Scholarship Fund; Attention: Finance; Robert W. Woodruff Library; 111 James P. Brawley Dr., SW, Atlanta, GA 30314



Walter W. Sessoms Scholarship Application Form

Personal Information: (Type or print clearly)

Full name:	ame: Student ID:		
Last First	Middle Initial		
Mailing Address:			
	City	State	Zip Code
Email:	Telephone: (C)		
Education:			
Name of Institution attending: CAU ITC MC RWWL; specify academic institution current	SC		
Enrollment status: Full-time Pa	rt-time (# Hours) =		
Classification: () Sophomore () Junior (() Senior		
Major: GPA:	(Provide o	riginal transcr	ipt from your institution)
Additional Information: (Use separate she	eet of paper)		
 Semester for which you are seeking school. Why do you believe you are the best car. Describe your academic/career goals. Describe your past or present accomplist extracurricular activities, honors or awar. What are your financial needs and how to the complete two letters of recommendations. 	hments in the followings received? will this scholarship h	ng areas: cor	•
Signature of applicant:	Date: _		
(Note: incomplete applications or applications subm the Scholarship Selection Committee. <u>Return comp</u> ksiddell@auctr.edu.)	-		•