

Beta Delta Scholarship Application
Michael Wray Moak Memorial Scholarship

This scholarship was established in honor and loving memory of Michael Wray Moak, University of Alabama 1979. Brother Moak's life was cut short in a tragic automobile accident. He is most remembered for his outstanding character, positive mental attitude and respect for others. The scholarship is a monetary award of seven hundred fifty dollars per academic year. Selection will be based upon financial need, extracurricular campus and community activities, and the applicant's stated need and purpose. Particular emphasis will be placed on financial need. The recipient is selected by the Board of Trustees.

Applicants must meet the following criteria:

- 1) be an initiated Brother of Alpha Tau Omega Beta Delta Chapter
- 2) be registered for a minimum of twelve hours per semester at the University of Alabama
- 3) have a minimum 2.9 cumulative GPA (including the last semester registered)
- 4) be eligible for at least one more full time semester at the University of Alabama

Name _____

Address _____

Phone _____ email _____

Class Status (Freshman, Sophomore, etc.) _____

GPA _____ Major _____ Graduation Date _____

Fraternity Involvement (committees, duties, offices, honors other contributions)

Extracurricular Campus and Community Activities (organizations to which you belong or have belonged to (honors, recognition, professional societies) with years of membership and offices held)

Financial Information

Occupation of Parents:

Father _____

Mother _____

Do your parents have any other dependents: _____ Ages of dependents _____

Give a percent estimate in the following categories of your college financial support.

Parents _____ % Self _____ %

Loans _____ % Other _____ % (state source of other)

List other scholarships, fellowships, or assistance you have applied for to date: _____

Type of Aid	Amount	Action on Application
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Total amount borrowed to date for your college education \$ _____

Sources of Debt _____

Other outstanding debts _____

Are you currently working while going to school? _____

Occupation _____

How many hours a week? _____ On average, how much to you make a week? _____

In a short paragraph, state any special needs or information that deserves consideration in our decision.

If this scholarship is award to me, I agree to use if for the expressed purpose and at the time stipulated by the founder of the scholarship and the Beta Delta Chapter.

Signature _____ Date _____