

May 21 - 23, 2015

## Student Scholarship Application

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

School: \_\_\_\_\_

Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Why do you want to attend the Kent Multimedia Workshop? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What experience do you have with multimedia presentations? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What do you hope to learn at the workshop? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What website do you spend the most time on? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Grade Point Average? \_\_\_\_\_

Pledge: I agree that if I am selected as a student scholar I will attend and participate fully in all sessions of the Kent Multimedia Workshop.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

**Please email this application to: [bzake@kent.edu](mailto:bzake@kent.edu) and [szake@kent.edu](mailto:szake@kent.edu)**



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