

OSHER FOUNDATION REENTRY SCHOLARSHIP APPLICATION
2025-2026 ACADEMIC YEAR

Information must be completed to be eligible.

City: _____ Zip: _____
Phone Number: _____ (mo/day/yr)
Address: _____ Expected _____ (sem/yr)

Have you been away from higher education for at least five years? Yes _____
Standing: Freshman _____ Sophomore _____ Junior _____
Will you attend **the 2025-2026 academic year** as a part time _____ or full time _____?
Credit hours completed at the end of the Spring Semester 2025 _____

