

OFFICE OF ADMISSION 309-341-7100 Phone 309-341-7070 Fax www.knox.edu

## **Rothwell Stephens Scholarship in Mathematics**

## **ROTHWELL STEPHENS SCHOLARSHIP IN MATHEMATICS** (\$20,000 over four years)

The Rothwell Stephens Scholarship in Mathematics honors Dr. Rothwell Stephens, a highly respected member of the Knox mathematics faculty for forty years. Professor Stephens led the department to become one of the most successful and respected programs in the Midwest. Alumni of the department fund the scholarship as a tribute to Professor Stephens and the contributions he made to their lives.

The Rothwell Stephens Scholarship of \$20,000 (\$5,000 per year renewable annually) is awarded to an incoming first-year student who indicates an interest in pursuing mathematics and whose scores are among the highest on an examination written by the Knox mathematics department.

Candidates must complete an application for admission and take the two-hour mathematics scholarship examination, preferably on campus, before January 15. If you are unable to come to campus, you may take the examination under the supervision of your high school math teacher by submitting the form below.

## **GENERAL SCHOLARSHIP GUIDELINES**

Students who receive Knox scholarships often qualify for additional financial assistance based on need. If so, we will help you to meet our costs with additional aid in the form of grant, work and/or loans. Scholarship candidates must be admitted to the College.

## **ROTHWELL STEPHENS SCHOLARSHIP IN MATHEMATICS**

I agree to administer the Rothwell Stephens Scholarship examination to the student listed below. The examination period lasts two hours. I agree to maintain the strictest security of the examination and return all test materials by January 15.

| Please return this form to: | Rothwell Stephens Scholarship<br>Office of Admission<br>Knox College<br>2 East South Street<br>Galesburg, IL 61401-4999 | or    | e-mail to:<br>admission@knox.edu |     |  |
|-----------------------------|---|-------|----------------------------------|-----|--|
| Student's name              |   |       | E-mail                           |     |  |
| Teacher's name              |   |       | E-mail                           |     |  |
| Department                  |   | Title | 9                                |     |  |
| Phone                       |   |       |                                  |     |  |
| High school                 |   |       |                                  |     |  |
| School address              |   |       |                                  |     |  |
| City                        |   |       | State                            | Zip |  |
| Teacher's signature         |   |       | Da                               | te  |  |