Scholarship Application

I. Personal Information:

Full Name: ______________________________________ Student ID# ________________

LOCAL  FIRST    MI

Local/Preferred Address: _________________________________________________________

Phone #: ___________________________ Email: _________________________________

Permanent Address: ___________________________________________________________

CITY  STATE  ZIP CODE  COUNTY

- Citizenship Status: _______ U.S. Citizen _______ N.C. Resident
- Major: _______________________
- Overall GPA: __________________
- Circle anticipated class status as of next fall semester:  SO    JR    SR
- Anticipated Graduation Date: _______________

II. Financial Information:

Some Scholarships are based on academic merit alone, while others are based on merit and financial need. You must also complete the Free Application for Federal Student Aid (FAFSA) to be considered for any scholarship in which financial need is a requirement of the scholarship. FAFSA forms can be obtained at (http://www.fafsa.ed.gov/). Please complete the section below. You may attach additional pages if necessary.

A. Describe any extenuating circumstances that affect your financial need.

B. List scholarships, financial aid, grant monies, stipends, or fellowships received in this current school year.

Scholarship applications and forms are due in Foust 100 by April 15.
III. Additional Information:

A. Briefly describe your educational and career goals.

B. List the UNCG faculty member from whom you have requested a recommendation on the attached form.

My signature indicates that all information submitted on this application is accurate and complete to the best of my knowledge. I understand that changing my major to a non-College of Arts & Sciences field will result in forfeiture of scholarship.

Student’s Signature ___________________________ Date ____________

Scholarship applications and forms are due in Foust 100 by April 15.
Faculty Recommendation Form

For College of Arts & Sciences Scholarships

Please complete this form and return it to Bob Hansen (100 Foust) by April 24, 2015

Recommendation for ____________________________________________________________

1. In what capacity do you know this applicant?

2. In what category would you place the applicant in comparison to other UNCG students you have taught in recent years?

   Upper 5% _______  Upper 10% _______  Upper 25% _______
   Upper 50% _______  Lower 50% _______

3. Please write a brief statement about the strengths and qualities of the candidate (or attach a separate letter).

Faculty’s Name ______________________________________________________________

Faculty’s Signature _______________________________  Date ________________

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