

## Scholarship Application

Name of Scholarship:					
Semester applying for: Name:				Z #	
Home Address:				Apt.#:	
City:		State:	Zip:		
Phone:	_ FAU Email:		_ Male: Fem	ale:	
U.S. Citizen Permanent U.S.	Resident Int'l Student _	Freshman	Sophomore	Jr Sr MS PhD	
Major:	CUM (	GPA:	FAU GPA:	Credit Hrs:	
Are you in the Innovation Leader	ship Honors Program? Yes _	No _			
Description of extracurricular act	vities and community service:	: (Please attacl	n additional pages i	f needed)	
Statement of Financial Need: (P	ease list all financial resources	s, scholarships	, grants, Florida pre	epaid program, tuition waivers, etc.)	
Pleas	e answer the following if your s	cholarship crite	eria requires this infor	rmation	
Race/Ethnic Origin: White:	Black: Asian or Pacific Is	lander: His	panic:		
American Indian or Alaskan Nativ	e: Other (please specify):				
I authorize the release of this apprecipients.	plication and any relevant sup	porting inform	nation to persons in	volved in the selection of scholarship	
Applicant's Signature:			Date:		
Each scholarship application pac	ket requires the following info	ormation:			
	Unofficial Transcript				
	One-page Statemer	nt That Explain	ns Why You Should	Receive the Scholarship	
	Resume				
	Letter of Recommer	ndation From a	a Faculty Member		
Please return applications to:	FAU, Division of Engineering Student Services and Advising 777 Glades Road, EE 102, Boca Raton, FL 33431				

Please send inquiries to: <a href="mailto:engineering-services@fau.edu">engineering-services@fau.edu</a>