FLORIDA ATLANTIC UNIVERSITY™
COLLEGE OF ENGINEERING & COMPUTER SCIENCE

SECME Scholarship Application

Name: _____   Z #: _____

Home Address: _____ Apt.#: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____ Male: ____   Female: ____

High School: _____ GPA:_____

Major: _____

Race/Ethnic Origin: White: ____   Black: ____ Asian or Pacific Islander: ___ Hispanic: ____

American Indian or Alaskan Native: ____   Other (please specify): _____

I authorize the release of this application and any relevant supporting information to persons involved in the selection of scholarship recipients.

Applicant's Signature: _____   Date: _____

Each scholarship application packet requires the following information:

____   Unofficial Transcript

____   One-page Essay on "Your Participation in the SECME Program and Your Future Goals"

____   (2) Letters of Recommendation (One From Your SECME Coordinator)

____   Resume (optional)

Please return applications to: FAU, Division of Engineering Student Services and Advising
777 Glades Road, EE 102, Boca Raton, FL 33431

Please direct inquiries to: engineering-services@fau.edu or 561.297.2780