

## **Student Scholarship Application Form**

## Office of Admissions 7380 W Sand Lake Rd, Suite 500 Orlando, FL 32819

Undergraduate	Graduate	<b>Doctorate</b>
Personal Information		
Full Name		
SSN or ID#		
E-mail		
Address		
City		
State		
Zip code		
Tel		
Scholarship you are applying for (Please choose one)	☐ The "IUL" Grant/ 10☐ The "Education" Sch☐ The "President" Sch	nolarship/40%
Minimum Evidence Paperwork "Please check with your enrollment officers for documents that apply to you"	<ul><li>Records of student</li><li>Current business re</li><li>Current official ban</li></ul>	cassport  zens and residents) s of money earned pport (if applicable) l based work programs grant, scholarship and financial aids
Previous Curriculum Followed		

Include Name of School, location, program, and number of credits.		
Cumulative GPA obtained		
Family Information- For dependant s Father / Mother / or Guardian	tudents only	
Mother		
Address		
Email		
Occupation		
Salary		
Father		
Address		
Email		
Occupation		
Salary		
Employment * A certificate of employment will be requi	red	
Employer Name:		
Employer Address:		
Contact Info for HR (Email and Tel):		
Net Salary: \$ / Month		
Please list loans, scholarships, and other aid as follows: type, source, amount anticipated, received?		
Tell us about yourself		
Please tell us why you would make a good candidate for this scholarship. What are your future plans, and how will		

this scholarship help you (use the space below and the back of this page, if needed)?
Community Sarvice/Extra Curricular Activities
Community Service/Extra-Curricular Activities
Diagon describe all community consists and/or system autricular activities and dates
Please describe all community service and/or extra-curricular activities and dates.
Special Specia
Please describe any special circumstances that would be helpful in the evaluation of your application. (Something about yourself, your interests, medical problems within the family, other family members in college etc.). If more

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space is needed, please use	another sheet of paper.
Certification and Signa	ature
I certify that the information in	n this scholarship application is true and correct to the best of my knowledge. I allow a
waiver of release of any pers	onal and academic information related to this application. I understand that this
	fidential from me and the public, and I waive any rights of access that I may have by
law.	
1	
Name and Signature	
Date	