

UDC Foundation Scholarship Application

Name: _____ Student N#: _____

Address: _____

Street City State Zip
E-mail: _____ Phone: (h) _____ (w) _____ (c) _____

Classification: Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduate _____

Major Field of Study: _____ Expected Graduation Date: _____ Cumulative GPA: _____
(2.0 or better)

Have you applied for financial aid using the Free Application for Federal Student Aid (FAFSA) at www.fafsa.ed.gov? ___Yes ___No

Are you an international student? ___Yes ___No

Are you a DC Public or Charter School graduate? ___Yes ___No If yes, which school? _____

Career Goal: _____

Honors and Awards: _____

Extracurricular Activities: _____

University/Community Involvement: _____

Do you currently owe funds to the University? ___Yes___No If yes, how much \$ _____

Eligibility Requirements:

Write a 250-300 word Personal Statement that describes how receiving this scholarship will help you continue your education. Please note that some awards may require letters of recommendation or other supporting documentation such as a transcript, additional essay, etc.

Do Not Write Below This Line

____ Approved Amt: \$ _____ Scholarship/Grant Awarded: _____

____ Denied Comments: _____

Committee Head Signature: _____ Date: _____

Submit your scholarship application and supporting documents to: UDC Foundation Scholarship Committee at foundation@udc.edu. For further information, please call the UDC Foundation office at (202) 274-5312.

DISCLAIMER

Universities of the District of Columbia scholarships are made possible by contributions from individual donor(s), organizations, and corporations. If selected, I will respond affirmatively to University or University Foundation requests to send letters of gratitude, meet with scholarship donor(s), attend events sponsored in recognition of donors, and participate in organizational meetings. I understand further that the University or University Foundation may wish to make a public announcement of scholarship winners and provide appropriate information about scholarship recipients to benefactors. I hereby authorize the University or University Foundation to release information pertaining to the scholarship, with the exception of personal salary data and the application for financial aid.

Signature: _____ Date: _____