UWF Foundation Study Abroad Scholarship Application

Please type responses to complete this form.

Last Name:	First Name:	UWF ID	:		
Mailing Address:					
City:	State:	Zip Code:			
Host Institution Name:					
Host City and Country:		Term Abroad: _	_ Summer 2	2019 F	all 2019
Major:	Expe	cted Graduation Tern	n and Year:		_
List any previous coursewo	rk taken prior to the pro	gram abroad that pre	pared you f	or this pa	rticular
experience abroad.					
_ Will you receive Financia	Aid for the term abroad	? YesNo If	yes, check	applicable	sources.
Federal Aid: Loans or G	Grants State Aid (Bri	ight Futures or other	Florida aid)		
UWF scholarship(s) _	Private Scholarship(s)			
What is the amount of you	r request? \$ Ma	ximum award amour	nt is \$2500		
To what expenses for your	program abroad, do you	plan to apply an awa	ırd?		
Attach a resume and state	ment of purpose of 500-	 600 words addressing	g the followi	ing questio	ons.
 How will participat How would receiving barriers that might Include any addition 	y abroad program and ho ing in this program help y ng a study abroad schola otherwise prevent you f nal information about yo ting your application.	you to reach your per rship help you overco rom participating in t	rsonal and a ome econom he study ab	cademic g nic and pe road prog	oals? rsonal ram?
Email this form along with the Director of International Pro	• • •				5, 2019.
For Office Use Only: Confirm student is approved GPA: Academic Standing: Sop					