Southern Connecticut State University

College of Arts and Sciences Faculty-Led Program Abroad Scholarship Application

Eligibility Requirements:

Applicants for the Arts and Sciences Study Abroad Scholarship must:

- Be registered at SCSU (FT or PT) and admitted to the School of Arts and Sciences.
- For undergraduates, have sophomore standing by the time their study abroad program begins.
- Be admitted to an SCSU faculty-led program abroad.
- Be in good academic standing.

FULL NAME (Last, First)

• Meet all requirements and prerequisites for their program abroad.

Once the application period has ended and all submissions have been received, each application is reviewed by the Global Education Advisory Committee (GEAC). Only complete applications will be considered. Once the review process is completed, awardees are notified of the funding they will receive by e-mail.

Personal Information

Student ID
E-MAIL ADDRESS
PHONE NUMBER
Academic Information
MAJOR(S)
MINOR(S)
CUMULATIVE CREDIT
OVERALL GPA
MAJOR GPA
GRADUATION DATE

Program Information

What program abroad will you participate in? Have you applied and been accepted?
Do you have previous experience with international travel (not required)?

Program Funding

Please describe all costs associated with your program abroad (tuition, program fee, health insurance, flight, personal expenses, etc.).
How do you plan to fund your program? (Personal savings, financial aid, other scholarships, etc.)
Essay Prompts
Your scholarship application essay should be no more than 250 words. Please address the following questions:
• Why are you interested in studying abroad in general and in your chosen location specifically?
 How does it relate to your academic and professional goals?
You may attach your essay to this application form or submit it as a separate document with the rest of your application materials.
Waiver to Release Academic Record FULL NAME (Last, First)
Student Id
I AUTHORIZE THE SCHOLARSHIP COMMITTEE TO REVIEW MY ACADEMIC RECORDS, INCLUDING MY CURRENT TRANSCRIPT.
Signature Date
Statement of Intent
FULL NAME (Last, First)
Student Id
IF I RECEIVE A SCHOLARSHIP AND FOR ANY REASON I DO NOT ATTEND THE STUDY ABROAD PROGRAM FOR WHICH IT WAS AWARDED, I WILL IMMEDIATELY RETURN THE SCHOLARSHIP FUNDS.