

Travel Course Scholarship Application

Deadline: Friday, October 18, 2019

Name: _			Fall 2019	Fr	SophJr Sr
Student	: ID #: A	MCLA Box #:	Phone Numb	er:	
Perman	ent Address:	City:	:	State:	Zip:
Major:		Minor:	Current	Cumulat	tive GPA:
<u>Criteria</u>	<u>:</u>				
•		ng f 3.2 or better tment to travel learning n to enroll in the travel course y*			
*Inform		equired essay can be found on th	e travel website a	and is spe	ecific to the individua
**One	of the faculty letters of r	recommendation may be from th	e faculty member	· supervi	sing the travel course.
Commu	inity Involvement/ Extra	acurricular Activities/ Volunteer	Projects on or off	campus	:
	•	omplishment that you would like your response requires it.)	to bring to the a	ttention	of the committee:
Student	t Signature:			Dat	e:
	Completed scholarship	o forms & required essays must	be returned to th	<u>ie Financ</u>	cial Aid Office
Office L	Jse Only				
GPA.	Maior:	Financial Need (if	annlicable).	ſ	Fin Aid·