

Tyler Junior College's Travel/Study Program in Greece

Scholarship Application

NAME: _____

SSN (required by the business office) : _____

Permanent Address:

Street:

City:

State:

Zip:

Email:

Phone:

SCHOOL INFORMATION

Major: _____

Minor: _____

Overall GPA: _____

Major GPA: _____

Minor GPA: _____

Total number of credit hours passed: _____

Are you currently on Financial Aid? _____ Yes _____ No

Are you on Academic Probation? _____ Yes _____ No (if Yes, Please explain)

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Name: _____

In 750 words or less, please explain why you should be awarded a partial scholarship for this program. Describe your educational goals, and how those goals blend with the 3 promises of Tyler Junior College: **1. a Quality Education, 2. a Vibrant Student Life, 3. And Community Service.** Include economic need, how this experience will impact your academic and professional life, your prior international experience, if any, and what you expect to gain from the experience in the overseas trip during the spring tour. How would you utilize the knowledge gained from the trip in your academic life?

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FACULTY LETTER OF RECOMMENDATION

Name of Student: _____

"A" number: _____.

Dear Colleague:

The student named above has applied for a partial scholarship for the Travel/Study Program. This scholarship is based on both NEED and MERIT. Would you please take a moment to fill out the following evaluation on his/her behalf? We thank you for your time and assistance.

1. Please indicate the type of contact you have had with the applicant:

2. Using the scale below, how would the candidate rate on the following?

1. Below average 2. Average 3. Above average 4. Superior 5. No opinion

A. Scholastic potential _____

B. Attitude to new ideas and cultures _____

C. Interaction with other students _____

D. Academic Performance _____

E. Initiative and Motivation _____

F. Maturity _____

3. REMARKS. Based on your knowledge of the applicant, please comment on his/her ability to participate and profit from the Travel/Study Program. Please mention any special circumstances and/or weaknesses that may aid the committee in making a final decision.

Print name **Signature** **Date**

Position/Department: _____

Please return to:
Dr. M. Khosrowshahi
Room 213 OHPE (Ornelas Health and Physical Education)
Tyler Junior College
1400 E. Fifth Street
Tyler, Tx 75701