

Department of Integrated Science and Technology

Continuing Student

SCHOLARSHIP APPLICATION

APPLICATION INFORMATION			
Last Name	First	MI	Today's Date:
Student ID:	Current Overall GPA:	Academic Level in the fall:	Full-time Student: Yes <input type="checkbox"/> No <input type="checkbox"/>
Declared Major:	Declared Minor:	Concentration (if any):	Expected Graduation Date:
APPLICANT PERMANENT ADDRESS:			
Street:			
City:	State:	Zip:	
APPLICANT SCHOOL ADDRESS:			
Street:		JMU Box No.	
City:	State:	Zip:	
APPLICANT CONTACT INFORMATION:			
Cell Phone Number:	Home Phone Number:	Email Address:	

Attach to this application a typed letter addressed to the ISAT Scholarship Committee wherein you describe your interest in ISAT, Geographic Science, or Information Analysis related technologies, extra-curricular activities, and other pertinent information about your interest in an ISAT scholarship.

I hereby certify that the above information is accurate and give James Madison University permission to use this information on the scholarship application for use in selecting a scholarship recipient.

Signature:	Date:
------------	-------

Return this form completed and letter to:
 ISAT Scholarship Committee
 Attention: Ms. Fasha Strange, ISAT/CS – Room 122