

MICHAELA FARNUM MEMORIAL SCHOLARSHIP APPLICATION



ISA DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, DISABILITY, AGE, GENDER, OR RELIGION ACCORDING TO THE EEOC GUIDELINES.

Please type or print in ink.

PERSONAL INFORMATION

FIRST NAME

MIDDLE NAME

LAST NAME

ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE

EMAIL ADDRESS

DATE OF BIRTH

SOCIAL SECURITY NUMBER

PROGRAM INFORMATION

CITY

COUNTRY

TERM/SESSION

PROGRAM PRICE

PROGRAM DATES

SCHOLARSHIP ELIGIBILITY

APPLICANT MUST:

- HAVE AT LEAST A 3.25 CUMULATIVE GPA.
- BE ENROLLED IN SECOND OR THIRD YEAR OF UNDERGRADUATE EDUCATION AT TIME OF ISA PROGRAM PARTICIPATION AT A U.S. UNIVERSITY/COLLEGE.
- HAVE COMPLETED AT LEAST ONE YEAR OF COLLEGE LEVEL FOREIGN LANGUAGE OR THE EQUIVALENT. (COURSES MUST APPEAR ON OFFICIAL TRANSCRIPT)
- BE ACCEPTED TO AN ISA PROGRAM. PLEASE NOTE THAT STUDENTS PARTICIPATING IN AN ISA CUSTOMIZED PROGRAM ARE NOT ELIGIBLE FOR THIS SCHOLARSHIP.
- BE ON FINANCIAL AID.
- ANY SEMESTER APPLICANT WHO MEETS THE REQUIREMENTS OF THE DR. CARLOS E. CASTAÑEDA MEMORIAL SCHOLARSHIP WILL ALSO BE CONSIDERED FOR THE MICHAELA FARNUM MEMORIAL SCHOLARSHIP. COMPLETING A SEPARATE APPLICATION IS NOT NECESSARY.

SCHOLARSHIP AMOUNTS AWARDED

- 5 x \$1,000 FOR FALL STUDY
- 5 x \$1,000 FOR WINTER/SPRING STUDY

THE FOLLOWING ITEMS MUST BE SUBMITTED OR YOUR SCHOLARSHIP APPLICATION WILL NOT BE CONSIDERED:

- SCHOLARSHIP APPLICATION** THIS FORM
- COLLEGE TRANSCRIPT(S)** ONE OFFICIAL COPY FROM EACH COLLEGE/UNIVERSITY ATTENDED. THE TRANSCRIPT SUBMITTED WITH THE ISA PROGRAM APPLICATION WILL SUFFICE ONLY IF IT IS AN OFFICIAL TRANSCRIPT.
- ESSAY** MUST ANSWER THE FOLLOWING: *WHAT ARE YOUR GOALS FOR YOUR STUDY ABROAD EXPERIENCE (ACADEMIC, PERSONAL AND/OR PROFESSIONAL)? WHAT OR WHO MOTIVATED YOU TO STUDY ABROAD? DESCRIBE HOW YOU ANTICIPATE DEALING WITH AND ADJUSTING TO UNFAMILIAR SURROUNDINGS, CULTURAL DIFFERENCES, AND SEPARATION FROM FAMILY AND FRIENDS? PLEASE KEEP UNDER 400 WORDS.*
- RESUME** THE LAST SECTION(S) OF YOUR RESUME MUST DESCRIBE YOUR EXTRACURRICULAR ACTIVITIES AND/OR WORK EXPERIENCE.
- LETTER OF RECOMMENDATION** MUST BE WRITTEN BY AN ACADEMIC REFERENCE (PROFESSOR, ADVISOR, ETC.) ON THE ISA LETTER OF RECOMMENDATION FORM. (SEE ISA WEBSITE).
- SUPPORTING FINANCIAL AID DOCUMENTS** YOU MUST INCLUDE STUDENT AID REPORT (SAR) & AWARD LETTER/FORM.

APPLICATIONS MUST BE POSTMARKED BY:

FALL: APRIL 30TH
WINTER: OCTOBER 30TH
SPRING: OCTOBER 30TH

SEND COMPLETED SCHOLARSHIP APPLICATION PACKAGE TO:

INTERNATIONAL STUDIES ABROAD
1112 WEST BEN WHITE BLVD.
AUSTIN, TX 78704
ATTN: ADMISSIONS

(PLEASE SEE REVERSE)

