



**SCHOLARSHIP APPLICATION FORM
ENGINEERING, SCIENCE & TECHNOLOGY
VIRGINIA STATE UNIVERSITY**

Last Name First Name MI

PLEASE PRINT CLEARLY

APPLICATION DEADLINE: June 25, 2010
ALL INFORMATION IS CONFIDENTIAL

Note: This scholarship application is only for School of Engineering, Science & Technology undergraduate students. You must be admitted and enrolled as a full-time student (12 credit hours or more) to be eligible for the **Altria RAPME** or the **VSU RAPME** awards. Applicants must submit a one-page resume highlighting academic and extracurricular activities. Incomplete applications will not be considered for the RAPME scholarships. Students will be notified only if they are awarded a scholarship.

Last Name First Name M. I.

Mailing Address

City State Zip Code County

Student ID Number (SSN) Date of Birth Phone Number

E-mail address: _____ Fall 2010 Classification: _____

Student pays tuition as a: Resident Non-resident

Residence during the school year: with parents off-campus housing University residence hall

Gender: Male Female

Ethnic classification: Caucasian African American Asian
 Hispanic Native American Other _____

Major: Computer Engineering Logistics Distribution Technology
 Manufacturing Engineering Industrial Technology
 Mechanical Engineering Technology
 Electrical Engineering Technology

ACADEMIC INFORMATION

Cumulative grade-point average: _____

FINANCIAL INFORMATION

Father's adjusted gross income: \$ _____ Total parents adjusted gross income: \$ _____
Mother's adjusted gross income: \$ _____ Student's contribution to college expenses (savings, etc.): \$ _____
Parent's contribution to college expenses: (savings, college funds, etc.): \$ _____
VSU Presidential/ Provost Scholarship: \$ _____
Number of children in family: _____ Number of children in family attending college (including self): _____

If the applicant is not a dependent for tax purposes, please provide the following:

Student's adjusted gross income: _____

Have you been awarded any other financial assistance? Yes No If yes, please list the other awards.

Name of Award _____ Amount of Award _____ Is the award renewable?

 Yes No
 Yes No

RECOMMENDATION FROM PROFESSOR/ DIRECTOR/ TEACHER

Professor/ Director/ Teacher will be contacted by phone or through email regarding your recommendation if needed.

Name of Professor/ Director/ Teacher Phone

Email Address

Applicant's Signature Date

Return completed application and supporting documentation to: Dr. Gymama Slaughter, VSU-RAPME Scholarship, School of Engineering, Science and Technology, Department of Engineering & Technology, PO BOX 9212, Petersburg, VA 23806. Please call 804.524.8989 x1136 if you have any questions.