ACTIVITY AWARD SCHOLARSHIP APPLICATION AND ACKNOWLEDGEMENT*



College of Fine, Performing and Communication Arts

SCHOLARSHIP A	PPLICANT	INFORMATION							
Last Name:			First:				MI:		
Street Address:									
City:		State:				ZIP:			
E-mail:		Banner ID:	Current Credit Hours: (the currently registered to receive the			•			
Type of Student (check one):		Graduate Studen	t:	☐ Undergraduate Student: ☐					
FACULTY CERTIF	ICATION								
This is to certify that the above named student has been recommended for an Activity Award Scholarship									
Description of the Academic or Co-curricular Activity this scholarship supports:									
Amount of Award: \$			Semester of Award:						
Course Number		Course Name							
Faculty/Staff Mem	·e:								
STUDENT ACKNO	WLEDGEM	ENT OF CONDIT	IONS						
This award is based of	n the student	's participation in the	activity as	determine	d by the faculty or s	staff memb	er mento	ring the s	student.
Failure to maintain ac renewals. It is your r type of scholarships of	esponsibility t	o check with the Fina	ancial Aid C						
I acknowledge that m	y receipt of th	ne Activity Award Sch	olarship is	subject to	the above terms and	d condition	S.		
Student Signature:						Date:			
INFORMATION C	N ACTIVIT	Y AWARD SCHO	LARSHIF	POLICY					
Please consult the CF checklist on the back	PCA Student A of this forms.	Activity Scholarship p Any questions shou	olicy on the ld be direct	e CFPCA Fa	culty and Academic department chair.	Staff Reso	urces We	b Page a	nd the
DEAN'S OFFICE US	E ONLY								
Date of Issuance:		С	Dean's Off	ice Appro	val Signature:				
SAA Number:		A	Activity Award Scholarship Code:						

^{*}The completed "CFPCA Activity Award Scholarship Checklist" must be submitted with this application.