1409 Walnut Grove Avenue, Rosemead, CA 91770 Tel: 626.571.8811 Fax: 626.571.1413 www.uwest.edu

Application for Scholarships

F/A 402

Name: *Last Name* _____. *First Name* _____ *Middle* _____

Status:

□ U.S. Citizen □ Permanent Resident □ Other (Type/#): _____ **SSN** (Last 4 digits): _____

□ International Student: Country of Origin: _____ Date of Birth: _____

Where do you plan to live while attending University of the West?

On campus: □ Single □ Double □ Triple **Off campus:** □ With parents/relatives □ On my own

Mailing Address: _____

No. Street Apt. City State Zip

Phone: _____- _____-_____ **Email:** _____

Program: □ Undergraduate □ Graduate - Master □ Graduate - Doctor

Major/Area of Concentration: _____

Academic Level: Undergraduate Program: □ First Year □ Second Year □ Third Year □ Fourth Year □ Fifth/Sixth Year

Graduate Program: □ First Year □ Second Year □ Third Year □ Fourth Year and Beyond

Apply Scholarships for (*Semester, Year***):** □ Fall, _____ *(year)* □ Spring, _____ *(year)*

Scholarships Request: ***Please read the policy of the scholarship(s) you'd like to apply for at Scholarship Opportunities https://www.uwest.edu/admissions-scholarships. You MUST submit all required documentation with this form.***

- **Institutional Scholarships**:
  - Incoming Students: □ Lotus Scholarship □ Metta Scholarship □ Dream Scholarship
  - Continuing Students: □ President's Scholarship □ Dean's Scholarship □ UWest Scholarship
- **Private Scholarships**:
  - Incoming Student: □ AJ Wang Foundation Scholarship Fund □ IBEF Scholarship □ IBEF Monastic Fellowship □ J. Yang Family Foundation Scholarship
  - Continuing Students: □ IBEF Research Grant □ GBA Benefactor Awards

By signing this document, I hereby certify the following:

1. I have read and understand all information provided to me in the document. I further certify that I have read the University of the West Financial Aid Handbook and understand my rights and responsibilities as a scholarship awardee.
2. I understand that any changes to the information that I have provided in this document may require a revision of my scholarship awards. I also understand that if there are any changes made after I have received my scholarship funds, I may be required to pay back part or all the funds received.
3. The answers and information that I have given in this document are true, complete, and correct to the best of my knowledge.

Student's signature: _____ Date: _____