## **Research Assistance Scholarship Application**

First Name:	Last Name:		UIN #:	
Email Address:		Phone #:		
Street Address:		City/State:	ZIP:	
Please check one:	Jndergraduate Student	Graduate	e Student	
Classification (check one	): Freshman	Sophomore	Junior Senior Grad	
Major: E	Expected Graduation Dat	e (semester and	l year):	
Credit Hours Completed	: Current Overa	II GPR:	Current Major GPR:	
Current Credit Hours En	rolled in this Semester: _			
Briefly describe what the				
Amount Requesting: Have you applied for any		ch:		
If there is a faculty mer	nber associated with th	e research, plea	se list who they are below.	
Research Faculty Members	er Full Name:			
Have you received this g If "YES" please prov Title of Research:	ide date and amount awa	rded:		
Are you related to any mboard?	ember of the board or re	gents of the coll	ege or university or its system's	
	□ YES	Г	] NO	
List all scholarships/fello amounts for each award				

Student Signature	Date
Research Faculty Member Signature (if applicable)	Date
Send application with the following items below:	

- O Cover Page (name, date, and subject line stating scholarship you are applying for)
- **Resume** (on the resume include work experience w/ job duty descriptions, volunteer work, awards and/or recognitions, certifications, and extra-curricular activities)
- Essay (essay should be about how the research has/will impact you and your education (Essays should be a
  minimum of 2 full pages typed and follow an APA or MLA style of format. Describe the learning outcome, the purpose
  and benefit of the research, who's involved, what the research means for academia, and how it will be used for
  others in the field of study)

Please email completed PDF application along with the items above to <a href="mailto:pvfascholarships@tamu.edu">pvfascholarships@tamu.edu</a>.