

Research Assistance Scholarship Application

First Name:	Last Name:		UIN #:	
Email Address:		Phone #:		
Street Address:		City/State:	ZIP	:
Please check one: Undergr	aduate Student	Graduate	Student	
Classification (check one):	Freshman	Sophomore	Junior Senior	Grad
Major: Expected	d Graduation Dat	e (semester and	year):	
Credit Hours Completed:	_ Current Overa	II GPR:	Current Major GPR	:
Current Credit Hours Enrolled in	this Semester: _			
Briefly describe what the funds a	are for:			
				
Amount Requesting (max \$500): Have you applied for any other §		<u></u>		
If there is a faculty member as	sociated with the	research, pleas	se list them.	
Research Faculty Member Full	Name:			
Have you received this grant in t If "YES" please provide date Title of Research:	and amount awar	rded:		
Are you related to any member of anyone affiliated with the colleged YE	e?		tem Board of Regen	ts or
List all scholarships/fellowships/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** (include work experience with job duty descriptions, volunteer work, awards and/or recognitions, certifications, and extracurricular activities)
- Essay (Essay should be about how the research has impacted or will impact you and your education. Essays should be a minimum of two full pages typed and follow an APA or MLA style. Describe the learning outcome, the purpose and benefit of the research, who's involved, what the research means for academia, links for costs, and how it will be used for others in the field of study.)

Please email completed PDF application along with the items above to pvfascholarships@tamu.edu.