NORTH CAROLINA AGRICULTURAL AND TECHNICAL STATE UNIVERSITY COLLEGE OF AGRICULTURE AND ENVIRONMENTAL SCIENCES

GREENSBORO, N.C. 27411

Telephone (336) 334-7979, or (336) 285-4798

SCHOLARSHIP APPLICATION

The College of Agriculture and Environmental Sciences (CAES) has scholarship funds to assist students with their educational expenditures while pursuing a degree in one of the four CAES departments: (1) Department of Agribusiness, Applied Economics and Agriscience Education; (2) Department of Animal Sciences; (3) Department of Family and Consumer Sciences, and (4) Department of Natural Resources and Environmental Design. The scholarship process is competitive, and will depend on SAT/ACT scores, academic performance, leadership, abilities, financial needs and available funds. All financial aid is coordinated with the N.C. A&T Financial Aid Office.

Applicant's Name:LAST	FIRST		MIDDLE
Current Address: Street	City		State
Zip County			
Home Telephone #:	Mobile#:	Email:	
U.S. Citizen: Resident Alien	: Non Resident Alien: _	Date of Birth:	
Race/Ethnic Origin (Used for rep	porting purposes only. Check	one.)	
() American Indian or Alaskan I or Pacific Islander () Other	Native () African-American	() Caucasian () Hi	ispanic () Asian
Gender/Sex: () Male () Female	Marital Status: () Single () Married () Divorc	ed Veteran: Yes () No (
Name of High School /or College	e Ad	dress	
Name of High School /or College Year (s) Attended De		dress	Final GPA

FOR NEW STUDENTS: Highest SAT Score: (Math _____) (Verbal _____) Highest ACT Score Banner ID: _____ Intended Major: _____ FOR CURRENT STUDENTS: BannerID: Major:______Department:_____ Classification: Academic Advisor: Year enrolled in N.C. A&T: _____ GPA: _____Number of semester hours currently enrolled Expected graduation date: _____ mm/yyyy Have you applied for a scholarship in your department? Yes () No (). If awarded, please give amount of scholarship award: _____ I declare that the information contained within this application is true to the best of my knowledge. I realize that making a false statement could cause my application to be denied. Signature: Date:_____ FOR OFFICE USE ONLY! Amt. Awarded _____ Date Awarded _____ Please return completed application to: Name of Scholarship Awarded: Code: Ms. Kishaa James Date Denied:_____ Student Services Manager 115 B. C. Webb Hall Reason Denied: North Carolina A&T State University Greensboro, N.C. 27411

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