

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
in: _____ 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: _____

Please return completed application to:

Ms. Kishaa James
Student Services Manager
115 B. C. Webb Hall
North Carolina A&T State University
Greensboro, N.C. 27411
(336) 285-4798 Fax: (336) 334-7580 kdosunmu@ncat.edu

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FOR OFFICE USE ONLY!

Amt. Awarded _____

Date Awarded _____

Name of Scholarship Awarded:

Code: _____

Date Denied: _____

Reason Denied: _____

