

APPLICATION FORM

The El Agizy & Worley Merit Scholarship
Technology and Operations Management Department

Please complete all sections of this form.

Personal Data:

Name:

Last

First

Middle Initial

Current Address: _____

City/State/Zip:

Home Phone: _____ Work Phone: _____

Permanent Address: _____

City/State/Zip:

SS#: _____

Academic Information:

Are you a continuing TOM student? _____ Yes _____ No

How many units are you carrying this quarter? _____ Next quarter? _____

Expected graduation date: _____

TOM Major GPA: _____

Are you on the President's or Dean's list? _____ Yes _____ No

Activities and Leadership Information:

List activities and leadership positions held in clubs and organizations of the Technology and Operations Management Department. _____

Certification: I certify that the information provided on this application is true, correct, and complete to the best of my knowledge. The University has the right to verify all information provided. I understand that providing false information may result in the mandatory repayment of the awarded scholarship.

Signature: _____ Date: _____

Please attach a copy of your vitae or resume