



## UNDERGRADUATE STUDENT APPLICATION Professional Research Experience Program

**STUDENT INFORMATION:** Please type or print in *BLACK* ink only.

NAME (Last, First, M.I.)	SOCIAL SECURITY NUMBER	DATE OF BIRTH
PRESENT ADDRESS	ZIP CODE	PHONE
PREVIOUS ADDRESS	ZIP CODE	PHONE
MAJOR	ACADEMIC LEVEL	CUM GPA

**STUDENT BACKGROUND:**

Are you a U.S. Citizen?	<input type="checkbox"/> Male  <input type="checkbox"/> Female	Ethnicity:
<input type="checkbox"/> Yes <input type="checkbox"/> No		(Optional)
Have you ever been granted a U.S. Government Security Clearance?	Granting Agency:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Date:	

**SCHOLARSHIPS:**

List any scholarships and/or grants that you are currently applying toward your tuition:

Name of Scholarship	Organization Sponsoring Scholarship	Amount of Scholarship	Dates Scholarship Has Been Applied to Tuition

How did you hear about the PREP Fellowship Program?

- |   |   |
|---|---|
| <input type="checkbox"/> Saw an announcement at school<br><input type="checkbox"/> Informed by a faculty member<br><input type="checkbox"/> Heard about it from a friend<br><input type="checkbox"/> Other (specify): _____ | <input type="checkbox"/> Informed in the Grants Office<br><input type="checkbox"/> Received information in the mail<br><input type="checkbox"/> Informed by an employer |
|---|---|

\_\_\_\_\_ **STUDENT SIGNATURE**

\_\_\_\_\_ **DATE**