Scholarship Application Form

School of Management Study Abroad Scholarship

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<th>October 15</th>
<th>Winter Semester</th>
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<td>January 15</td>
<td>Spring/Summer</td>
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Name ___________________________ UMID __________________

Address ____________________________ City, Zip Code

Scholarship applicants must be enrolled or accepted for admission to the School of Management (SOM) at the University of Michigan – Flint. The entire application must be completed and signed. In addition to the application there is also a required statement that must be submitted (see below). Please type or write legibly in black ink.

1. Applicants must be registered in a School of Management (SOM) degree program.

2. Applicants will be selected based on merit and financial need. GPA and the Expected Family Contribution (EFC) reported on the Free Application for Federal Student Aid will be considered. Priority will be given to students in SOM programs that require study abroad.

3. Funds are to be used towards reducing the costs of study abroad courses offered by SOM faculty, and semester abroad at SOM-partner institutions in other countries.

4. Applicants need to submit a statement explaining how they plan use the scholarship funds and the benefits of participating in study abroad programs for their career development.

5. The annual scholarship amount varies depending upon the available funding.

I have read and agree that all statements made in this application are true and correct to the best of my knowledge. Deliberate falsification or misrepresentation will result in forfeiture of scholarship(s) received from the University of Michigan–Flint. I realize that when I accept awards and scholarships, my directory information may be used for news releases. If a recipient fails to enroll, cancels, or withdraws for any term covered by the scholarship award, the amount of the award for that term and any succeeding terms will be forfeited and returned to the scholarship account. Any request for an exception to this policy must be submitted in writing to the Office of Financial Aid prior to, or at the time of, cancellation or withdrawal. If an award is forfeited, students will be responsible for any resulting tuition charges or fees.

Signature ___________________________ Date __________________

Return completed form and all materials by January 15, 2016 to:

The University of Michigan-Flint
Office of Financial Aid
277 University Pavilion
Flint, MI 48502-1950

For Office Use Only:

Major ___________________________ GPA ___________ EFC ___________