

SCHOLARSHIPS FOR EXCELLENCE



**COLLEGE OF ENGINEERING, TECHNOLOGY,
AND COMPUTER SCIENCE**

APPLICATION DEADLINE

MARCH 1, 2008

CERTIFICATION:

I certify that all statements contained in the foregoing application are true and correct, that **I have applied for admission to IPFW, that I intend to enroll for the fall 2008 semester, and that I intend to complete a bachelor's degree at IPFW.** Further, I authorize the department to which I applied to provide GPA information to a company scholarship sponsor.

Signed: _____
(student)

Date: ____/____/___

TRANSCRIPT:

Please include an official transcript of your high school grades.

RELEASE OF INFORMATION:

I authorize my school to provide information, including confidential transcripts of my grades, to the Scholarship Selection Committee.

Signed: _____
(student)

Date: ____/____/___

APPLICATION DEADLINE:

This portion of the application along with the High School Teacher's/Guidance Counselor's portion must be returned by **March 1, 2008.**

TO ONE OF YOUR TEACHERS OR GUIDANCE COUNSELORS

The Selection Committee must rely heavily upon your estimate of the applicant's general ability and fitness for college work. For this reason, a statement is requested that will supplement the information given on the previous pages and assist the committee in its consideration of the candidate's qualifications. Please give details, in the form of incidents or examples, as you appraise the applicant with regard to leadership ability, citizenship, initiative, and strength of purpose. Finally, what are the qualities that most commend the applicant?

Please use the space below and back of page for your statement regarding the candidate's qualifications.

(_____)
Student's Name

Signed: _____

Position: _____

Date: ____/____/____ Address: _____
Street

Area Code Phone Number City State Zip

Please complete Page 2 . .



ETCS Scholarships for Excellence

Media Waiver Form

By signing below, I give my consent to the College of Engineering, Technology, and Computer at Indiana University-Purdue University Fort Wayne to use my name, comments, photograph or to be videotaped in order to promote ETCS Scholarships for Excellence Program.

Signature	Date
Name (Printed) _____	
Address: _____ City: _____ State: _____ Zip: _____	
Phone: Home _____ Work _____ Age: _____ Sex: _____	

For those persons under the age of eighteen (18) years: I hereby consent and agree to the above as the Parent/Legal Guardian of _____ (minor's name).	
_____	_____
Parent or Legal Guardian	Print Name

Please return completed form along with your scholarship application to:

Gerard Voland, Dean
College of Engineering, Technology, and Computer Science
2101 E. Coliseum Blvd.
Fort Wayne, IN 46805-1499