Undergraduate Scholarship Application Form

DEADLINE: OCTOBER 14th, 2016

1. Name: ______________________________________________________________
   (Print/Type)                 Last Name                                 First Name                          SBU ID#

2. Mailing Address:      ______________________________________________________________
   Number, Street, and Apt #
   ________________________________________________________________
   City                                           State                    ZIP

3. Email: ____________________________________    Phone:_____________________________

4. School Year and Academic Affiliation (major, department): _____________________________

5. Average G.P.A.: __________________________________________________________________

6. Korean Studies Courses Taken until Fall 2016:
   ________________________________________________________________________________
   ________________________________________________________________________________

7. Recommender:_________________________________________________

Signature:__________________________________ Date:_________________