Application Form and Instructions

Entering Freshman
Current ASU Student

First Name: _______________ Last Name: _______________ Middle Initial: ___
Phone: (____)____-______
Email Address: __________________________________________________________

Mailing Address:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

County of residence: ________________________
High School: ______________________________

Letters of recommendation: We recommend that the letters be included in the application packet. Regardless, please include the names and address of the references writing letters.

Name and address of letter from first reference:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

Name and address of letter from second reference:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
Along with this application form, also include the following in your application packet:

- A cover letter
- An essay of 500-1500 words discussing your career goals
- An official high school transcript (Freshmen)
- All official college transcripts (Rising Juniors)
- Sealed recommendations
- Official SAT scores, unless included on the transcript
- Other indicators which you feel should be included (participation in contests, professional meeting, presentations, community service, etc)
- Completed release statement for release of financial need results to the scholarship committee (below).

I request that the Financial Aid Office of Appalachian State University provide results of my financial need analysis to the scholarship committee of the Departments of Mathematical Sciences and Computer Science for the purpose of consideration for this scholarship.

Full Name: ___________________________________
Social Security Number: ________________________
Date: _______________
Signature: ____________________________________

Mail all of these items, along with the application form in one envelope to:

CSEMS Scholarship Program
c/o Dr. James Wilkes
Department of Computer Science
CAP Building
Appalachian State University
Boone, NC 28608

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