

CITIZENSHIP

Are you a U.S. Citizen? If no, please indicate your citizenship. Yes ___ No _____

Circle student level for entering term: Junior Senior M.A. MAT M.Ed. Ed.S. Ph.D.

USF College of Education declared major? _____

What is your cumulative GPA? _____ Number of hours completed at USF: _____

TEST SCORES: SAT _____ ACT _____ GRE _____

What semester will you be interning: _____

Expected graduation date: _____

List any other SCHOLARSHIP(S) for which you are applying:

CERTIFICATION

I hereby authorize selection committee members and University officials to obtain transcripts of my academic records and other information requested in support of my application. By my signature below, I indicate my understanding that this information will be used only for the purpose of selecting the Richardson Scholars.

Your signature certifies that all of the information you have provided and included in this form is accurate. It also confirms that you meet all of the eligibility requirements as stated in this document. Information provided in this application may be shared with the donor or donor's designee.

Student's Name (Please Print): _____

Student's Signature: _____ Date: _____

DEADLINE: Application must be postmarked by 5:00 pm on March 1

SEND TO: Attention: Aaron Greaser
College of Education
University of South Florida
4202 East Fowler Avenue, Mail Stop EDU105
Tampa, FL 33620

Phone: (813) 974-6399