



The University of Kansas

# SUMMER BIOTECH SCHOLARSHIP APPLICATION

12600 Quivira Rd., Overland Park, KS 66213

## Instructions:

1. Please type or print clearly the following information. Turn in completed application, with all applicable signatures, to jtreml@ku.edu with the subject line: 'BIOTECH SCHOLARSHIP'.
2. If this form is incomplete, inaccurate, or not signed, it will not be considered.

### Personal Information:

Applicant Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Academic Information:

School (this Fall) \_\_\_\_\_

School Year (Grade; this Fall) \_\_\_\_\_

GPA (Most recent year) \_\_\_\_\_

College or University you plan to attend \_\_\_\_\_

Intended Major: \_\_\_\_\_

Do you qualify for a free or reduced lunch?

Yes                  No

Would an inability to pay for this program in full or in part, prevent you from attending?

Yes                  No

Explain Briefly:

Prior Lab experience (none required):

Explain how this program will help you attain your goals

I certify that the statements herein are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the scholarship selection committee(s) and scholarship donor(s).

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_