**Undergraduate Scholarship Application Form**

**THE MILTON E. MOHR**

**SCHOLARSHIP and FELLOWSHIP PROGRAM**

Please Print

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** |  | | | | | | | |  | | | | | | | | | |  | | | |
|  | *First* | | | | | | | | *M.I.* | | | | | | | | | | *Last* | | | |
| **UNL ID #** | |  | | | | | | | **E-Mail** | | |  | | | | | | | | | | |
| **Local Home Address** | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | *Street Address/Box Number* | | | | | | | |  | | | | | | | |  |
|  | | | | | |  | | |  | | | | | | | |  | | |  | | |
| *City* | | | | | | *State* | | | *Zip Code* | | | | | | | | *Area Code* | | | *Telephone Number* | | |
| **Permanent Home Address** | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | *Street Address/Box Number* | | | | | | | | | | |  | |  | | | |
|  | | | | | |  | | |  | | | | | | | |  | | |  | | |
| *City* | | | | | | *State* | | | *Zip Code* | | | | | | | | *Area Code* | | | *Telephone Number* | | |
| **Department** | | |  | | | | | | | | | | | | | | | | | | | |
| **Major** *(Primary)* | | | |  | | | | | | | | | | | | | | | | | | |
| **Number of Credit Hours Completed Toward Degree\*** | | | | | | | | | | | |  | | | | | | | | | | |
| **Number of Credit Hours in Progress\*** | | | | | | | |  | | | | | | | | | | | | | | |
| *\*Hours completed plus those in progress must be greater than 54* | | | | | | | | | | | | | |  | | | | | | | | |
| **Cumulative GPA** *(must be 3.5 or greater to be eligible)* | | | | | | | | | |  | | | | | | | | | | | | |
| **Expected Date of Graduation** | | | | | | |  | | | | | | | | | | | | | | | |
| **Advisor/Mentor** | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | |  | | | | | | | |
| *Signature of Student* | | | | | | | | | | |  | | | | *Date* | | | | | | | |
|  | | | | | | | | | | |  | | | |  | | | | | | | |
| *Signature of Department Head* | | | | | | | | | | |  | | | | *Date* | | | | | | | |

Submit to your Department Head by**Friday, March 8, 2019**

* Completed application form
* One (1) letter of reference
* Official Transcripts (*obtain transcripts from 107 Canfield*)
* Resume
* Statement of Career Intentions *(200-300 word essay on your career aspirations as they relate to the scientific, technological, and/or business aspects of biotechnology or engineering. Sign and date your essay.)*

Recipients of the award will be selected based on their academic performance and potential for accomplishments in their specific field.