

ISOPE Outstanding Undergraduate Student Scholarship

Application Form

1. Give full name, as it would appear on your official academic transcripts.

Family Name

First Name (Given Name)

Middle (or Maiden Name)

2. Date of birth (day/mo/yr): ___ - ___ - ___ Male Female

3. Complete mailing address including the university name:

_____ city _____ country _____

4. Telephone Number: _____ Fax Number: _____

5. List below all colleges, universities, or institutions of higher education (after high school) you have attended or are currently attending.

Name and location of institution	Year of first/last terms or semesters	Area of specialty or special interest

6. Field of specialty or interest:

7. Technical papers at technical meetings published, presented, and submitted:

8. Research or design project(s)

9. Employment experiences:

10. Name and address of your professor from whom you are requesting the letter of recommendation for the scholarship.

11. State the funds (scholarship or assistantship) you receive for your undergraduate studies in a university.

12. I submitted a paper to and plan to attend an ISOPE-sponsored conference or symposium this year:

yes no

13. I am currently a student member of ISOPE: yes no

I plan to become a student member of ISOPE: yes no not applicable

I apply for *ISOPE Undergraduate Student Scholarship*. If I am awarded, the money will be used for the scholastic purposes such as books, laboratory or computer equipment.

Enclosed are: (1) official undergraduate transcript; (2) a letter of recommendation from (the envelope sealed by) department chairperson, or an ISOPE member.

Signature: _____ Date: _____

Complete and mail to the Awards Committee, ISOPE, P.O. Box 189, Cupertino, California 95015-0189, USA; Fax 1-650-254-2038; www.isopec.org.