STUDENTS OF COLOR ENDOWED SCHOLARSHIP FUND
PROGRAM POLICY

Purpose of the Fund

The Students of Color Endowed Scholarship Fund exists to provide encouragement and financial assistance to a student of any class who is involved in a Center for Global Education and Experience customized program, or summer program, or semester program, and is affiliated with one of the following:

- The American Indian, Hispanic/Latino, Pan Afrikan or Pan Asian student service programs at Augsburg College
- Evangelical Lutheran Church in America (ELCA) college or university
- Another college or university in Minnesota

The amount of any scholarship provided will depend on the applicant’s financial need and depends upon the resources available in the fund during any given year. Final decision regarding the awarding of funds rests with the Center for Global Education and Experience.

General Criteria

1. Should apply at least two months prior to the expected date of departure.
2. Will be expected to contribute a portion of the total cost of the trip.
3. Will share their experiences with CGEE in the form of a written summary within 30 days of date of return. We also encourage scholarship recipients to share 3-5 photographs from the seminar with CGEE to accompany their summary. The summary and photographs may be used as content for our blog or in other promotional materials.
4. Will share their experiences with their community networks (e.g. university/college campus, faith community, family, etc.).
5. Augsburg College students will be required to attend the Scholarship Brunch at the end of the school year.

Specific Criteria

1. Should meet the general criteria and be a member of one of the groups listed under the purpose of the program.
2. Should be able to document financial need. Student status alone will not be sufficient documentation of financial need. Students may be requested to provide financial aid documents.
3. Will be encouraged to explore other resources prior to seeking CGEE scholarship funds.
STUDENTS OF COLOR ENDOWed SCHOLARSHIP FUND
Application Form

Name: ___________________________ Email: ___________________________

Postal Address (include ZIP): __________________________________________

Day phone: ______________________ Evening phone: ______________________
Age: ______________ Gender: ______________ Major or Degree program: ___________

Primary ethnic group(s) with which you identify: ____________________________

Year of School (if applicable): __________________________________________

College or University attending: _________________________________________

Name of the Program and Sponsoring Organization/Individual:

Dates and location(s) of the Program: _____________________________________

Estimated Total Cost of Program: _________________________________________

Please share your plans to fund your participation in the program. You must specify dollar amounts for each question. These amounts should add up to the total cost of the program.

Federal Pell Grant: $__________
State Grant: $__________
Federal Stafford Loan: $__________
Other Scholarships/Aid: $__________
Other Loans: $__________
Fundraising: $__________
Personal Funds: $__________
Other Sources of Funding: $__________

Students of Color Endowed Scholarship Funds Requested: $__________

TOTAL COST OF PROGRAM = $__________
For students only:
Are you eligible for financial aid during the term of the program? YES NO
Are you receiving financial aid during the term of the program? YES NO

Indicate how much financial aid will be applied toward this program: $_________________

Name of Financial Aid Officer from your school: ______________________________________

Verified by: Signature/Date of Financial Aid Officer: _________________________________

Title: ___________________________ Email: ___________________ Day Phone: ____________

Please attach a separate page of typewritten responses to this application for the following questions 1-6:

1. Tell us about yourself and why you are interested in this program.

2. How do you anticipate this program will enrich your life?

3. What is the nature of your community engagement (for example: organizations, boards, committees, volunteer/service work, participation in faith community, etc.)?

4. Why would you be an appropriate recipient of scholarship funds?

5. Please list your international travel experience from the last five years, and include any international travel plans you have for six months after the completion of this travel seminar.

6. Is there any other information you want us to know about you or your financial situation prior to making our decision?

Please include a letter of support with your application. The letter should be written by someone who is not a family member, preferably a Director from the Multicultural Student Services Center at Augsburg College. Otherwise, a TRiO advisor, academic advisor, professor, mentor, pastor, or supervisor, etc. would also be accepted.

All of the information contained on this application is accurate to the best of my knowledge:

________________________________________________  ______________________
Signature of Applicant Date

Thank you for taking the time to complete this application! Please send completed applications to:

Attn: Olee Amata, Center for Global Education & Experience, Augsburg College, Campus Box 307, 2211 Riverside Avenue, Minneapolis, MN 55454, amata@augsburg.edu.

AUGSBURG COLLEGE