



Carol Creek Bailey Undergraduate Award for Excellence in Sociology Spring 2010

REQUIREMENTS

This is a scholarship in the amount of \$1,000.00 to be awarded to a full-time Junior or Senior majoring in Anthropology for the 2010-2011 academic year.

Requirements for consideration:

- Applicant must be a returning full-time student (Junior status) for the 2010-2011 academic year.
- Applicant must be a declared Anthropology major.
- Applicant must have a G.P.A. of at least 3.5; submission of unofficial transcript printed by the registrar's office along with this application is required.
- Applicant must complete application, attach a one-page personal statement discussing his/her educational accomplishments and future goals, and how this scholarship will assist in reaching those goals.*
- Award recipients, once chosen, will be required to prepare and deliver a thank-you note to the scholarship donor and must attend a luncheon with the donor in order to receive payment of award.

Please ensure that you include your personal statement and transcript along with your completed application. It is your responsibility to ensure that all required documentation is submitted by the deadline. Incomplete applications and submissions missing documents will not be considered. Provide your name and UCI identification number on all your documents.

** All submitted applications and attached documents become the sole property of the School of Social Sciences and will not be returned once received.*

SUBMISSION DEADLINE

Please submit your application and paper electronically to:

Teresa Neighbors, scholarships@mail.ss.uci.edu or in person at Social and Behavioral Sciences Gateway (SBSG) 5406.

The deadline for application submission is 4:00 p.m. Friday, May 14, 2010.

APPLICANT INFORMATION

Name:	Declared Major(s):	
UCI Student ID#:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	G.P.A.:
Are you receiving Financial Aid? <input type="checkbox"/> Yes <input type="checkbox"/> No	Expected Date of Graduation:	
Local Address:	UCI E-Mail:	
City:	State:	Zip Code:
Cell/Phone Number:	What is your class level?	

FACULTY REFERENCE 1

Name:	UCI E-Mail:
Title:	Office:
Department:	Office Telephone Number:

FACULTY REFERENCE 2

Name:	UCI E-Mail:
Title:	Office:
Department:	Office Telephone Number:

APPLICANT SIGNATURE

Applicant Signature: <i>(Typed name will be accepted as signature)</i>	Date: dd / mm / yy
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FOR DEPARTMENTAL USE ONLY (PLEASE DO NOT WRITE)

Received by: _____	Reviewed by: _____
Awarded? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Submitted: _____ Award Date: _____

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