

Florida Surveying and Mapping Society Scholarship Fund Inc. Application

(Must attach unofficial transcript signed by faculty member)

Section I: Personal Information

Applicant Name:

Last First Middle

Mailing Address:

Street Apt/Suite

City State Zip Code

Home phone Work phone Email

Present/Previous Educational Scholarships or Loans: (List name of fund, account, current balance and for what school period)

Section II: Education

High School: _____ **Graduation Year:** _____

Current College or University (ATTACH TRANSCRIPT!)

Name/Program/Department: _____

Contact Name for verification of enrollment: _____

Status (Check one) Full Time (at least 12 hours per semester): ____ Part Time: ____

Major or field of study: _____ Type of degree sought: _____

Current GPA: ____ Previous term GPA: ____ Planned Graduation Date: ____

Previously attended College/University: _____

Years attended: ____ Major: ____ GPA: ____

Are you a student member of FSMS? _____

If yes, please list all activities you have participated in as a member over the last semester:

What would you recommend for greater student involvement?

Section III: Employment History

Current Employer: _____

Street	Apt/Suite	
City	State	Zip Code
Work phone	Fax	Website

Date employed: _____ Position: _____

Previous Employer: _____

Street	Apt/Suite	
City	State	Zip Code
Work phone	Fax	Website

Date employed: _____ Position: _____

Section IV: FSMS Member Endorsement (non-academic)

I, the undersigned, personally endorse, _____ for an FSMS scholarship.

Additional Comments - please include known exceptional awards & accomplishments:

Name	Chapter	Phone Number
Signature	PSM#	Date

Section V: Essay

What are your educational and career goals? Are there factors, which make you particularly deserving of support?

Applicant Signature

Date

Email or Mail to:
director@fsms.org
Florida Surveying and Mapping Society
1689 Mahan Center Boulevard, Suite A
Tallahassee, FL 32308