

I declare that the information provided is true, correct and complete, and that any false statement may result in cancellation of any award. I understand that if I am granted a scholarship I must be a Radiologic Sciences major and carry at least 12 undergraduate credits for the entire period of my award. I understand that some scholarships may require enrollment in specific emphasizes.

I authorize the Financial Aid Office to release, upon request, information regarding my academic progress and financial circumstances, if applicable, to any agency, organization or individual that grants me, or may grant me, a scholarship.

Signature _____ Date _____

**APPLICATIONS MUST BE IN THE RADIOLOGIC SCIENCES OFFICE HSR-126
NO LATER THAN FEBRUARY 15th, 2010
INCOMPLETE AND LATE APPLICATIONS WILL NOT BE CONSIDERED**

DON'T FORGET!! FILE THE FAFSA (Financial Aid Form) by **February 1** to be eligible for need based scholarships or **YOU WILL NOT BE CONSIDERED FOR THEM.** You can access the FAFSA on-line:
<http://www.fafsa.ed.gov/>

For Radiologic Sciences Office Use Only

_____ GPA _____ Credits _____ Program _____ Need _____ Residency