

COPPIN STATE UNIVERSITY

SCHOOL OF BUSINESS

TRANSFER STUDENT SCHOLARSHIP APPLICATION

PART I: BASIC INFORMATION

| Student ID: | | | GPA: | | | | | | |
|---|--------------------------------|-----------------|------|------|--|--|--|--|--|
| Name: | | | | | | | | | |
| Permanent Address: | | | | | | | | | |
| (Number and Street) | | | | | | | | | |
| City: | | State: | | Zip: | | | | | |
| Primary Telephone Number: | | Email Address: | | | | | | | |
| Current College/University: | | | | | | | | | |
| Semester for which you are applying: | Spring 20 or Fall 20 | Intended Major: | | | | | | | |
| I understand that if awarded, I <u>must</u> register for at least <u>12-15</u> credits each semester and maintain a <u>cumulative GPA of at least a 3.0</u> or higher. (initial here) | | | | | | | | | |

PART II: PERSONAL INFORMATION

| List your school/community activities, including offices held and honors received: | | | | | | | | | |
|--|----------------------|-------------------------------|-------------------|---|----------------|--------|--|--|--|
| Activity | Dates | Office Held/Honor(s) Received | | | | | | | |
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| | | | | | | | | | |
| Job/Volunteer Work Dates | | Title/Basic Responsibilities | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| State your educational goals and ca | areer objectives: | | | | | | | | |
| Signature: | Date: | Date: | | | | | | | |
| | | | | | | | | | |
| | | For Office Use Only: | | | | | | | |
| RETURN APPLICATION TO: | | Earned Credit Hours | Cumulative GPA | SCHOLARSHIP AWARDED | Eligible | | | | |
| Coppin State University School of Business 2500 W. North Avenue Baltimore, Maryland 21216 | | | | \$1,000 Transfer Student Scholarship | Yes | No | | | |
| Coppin State University does not di programs or employment. | scriminate on the ba | sis of sex, religion, | handicap, natio | onality, or ethnic origin | n in its educa | tional | | | |