

ASM INTERNATIONAL FOUNDATION SCHOLARSHIP APPLICATION

Part 1: Fill out completely. Please TYPE or PRINT clearly in BLACK INK. All materials must be submitted in English.

1. Miss Mrs. Ms. Mr. Full Name: _____

2. Indicate preferred address for contact and mailing:

Address: _____

Address: _____

City/State: _____

Country/Zip Code: _____

Telephone: _____

E-mail: _____

3. ASM Membership: ASM or Joint ASM/TMS Student Member Number: _____ Join Date (Mo/Yr): _____
(ASM student membership is required for scholarship consideration)

4. Country of citizenship: _____

5. College or University: _____

6. Major/Concentration (including option if applicable): _____

7. Employment Experience (résumé may be attached): _____

8. Attach a personal essay describing interest in metallurgy/materials, career plans, long-range aspirations, special achievements and honors, employment experience, interdisciplinary skill/interest, and social values (maximum of two typewritten pages).

9. Attach no more than two letters of recommendation from faculty or employer. One must be from a professor in applicant's major department.

10. Submit a current academic transcript through the fall term (an official student copy is acceptable).

11. Attach a photograph to be used for publication of award winners. Photograph will NOT be part of selection process.

Part 2: To be considered for any need-based awards, you must complete this section. Students at the junior or senior level studying in North America only are eligible. Need assessment will be based on this information.

A. Attach a brief personal statement regarding your financial need. How will this scholarship aid you in your academic goals?

B. Do you plan to apply for financial aid for the upcoming academic year? Yes No If No, why not? _____

C. Please provide for the next academic year: Annual Tuition Cost: \$ _____ Standard Room/Board Costs: \$ _____

D. Are you currently receiving financial aid? No Yes

E. Please complete the following information for the current academic year:

Total Financial Aid Provided: Loans: \$ _____ Grants/Scholarships Awarded: \$ _____ Other: \$ _____

F. Please provide a Financial Aid contact to verify the above information:

Name: _____ Tel: _____ Fax: _____

Please sign below if this application is complete and accurate:

Signature: _____

Date: _____