THE UPS SCHOLARSHIP NOMINATION FORM for Academic Year 2020-21

This year the UPS Scholarship Fund will offer a scholarship gift of \$ 3,000 per AICUP member institution, to be awarded to ONE student the school chooses.

CIC has become more prescriptive in how it wants the scholarship awarded. In a letter to AICUP, CIC's Carol Shuler states: "... At each college, the scholarship is to be awarded in its entirety in one allocation to a full-time, undergraduate student whose background reflects one or more of the characteristics of the student population that is of highest priority to the UPS Foundation and CIC's First Opportunity Program: first-generation, low-income, minority, or new American students."

After selecting the student to receive this scholarship, please complete the following form for the recipient. Completing this form will allow us to report accurately the distribution of the UPS money. Please note that the selected student <u>must</u> send a thank-you note to CIC for the scholarship.

Please complete the form below and return it to AICUP via Sharefile and the upload link you were provided **no later than Friday**, April 24, 2020.

All forms MUST have the student's signature (printed or electronic).

Institution Name:							
Student Information (Please print or type)							
Name (First and Last):							
Current Address:							
City: Sta	te:	Zip:					
Permanent Address (if different):							
City:St	ate:	_Zip:					
Which address should we use for mailing	g?						
Student campus email address:							
Aca	demic Informatio	on					
Major:	Minor:						
Cumulative GPA:	GPA in major:						
Freshman Sophomore Junior Senior (C	Check one) Date of Gra	duation:					

Release Authorization

I certify that to the best of my knowledge this information is true, complete and accurate. I authorize the release of information to confirm and/or verify this application. I also agree to be contacted in subsequent years in order for AICUP and/or CIC to request follow-up information about my whereabouts and activities understanding that provision of such information is entirely voluntary.

All forms MUST have the student's signature, either printed or electronic, for submission.

UPS SCHOLARS PROGRAM Student Selection Form FY 2020-21				
COLLEGE NAME	1		STATE	
STUDENT NAME				
STUDENT'S MAJ	OR			
GPA		YE	AR IN COLLEGE	
	FINANCIAL AID OFFICER'S NA	ME		
	TITLE			
	FINANCIAL AID OFFICER'S PH	ONE NUMBER		
	FINANCIAL AID OFFICER'S EM	IAIL ADDRESS		
ShareFile lin Thank you no Eduardo Mar	ete both pages of this form and k you were provided by Frida otes for CIC may be addressed tinez, President of the UPS For : AICUP, 101 N Front Street, F up.org	y, April 24, 2020. to: undation c/o AICUF Harrisburg, PA 1710 SOCIATION Oc		signature to the
	OLLEGES	FERRERSITIE		

If you have any questions, please call Casey Trinkaus at 717-232-8649, ext. 232 or send an email to trinkaus@aicup.org. If you would like more information about AICUP, you can visit our website at <u>www.aicup.org</u>