



Southern™
Illinois University
Carbondale

The Augusta And Jimmy Auerbach Endowed Memorial Scholarship for International Students



(This scholarship is only for students who can prove serious financial need and have demonstrated outstanding academic achievement (GPA of at least 3.25))

SIUC Application Guidelines

The Augusta and Jimmy Auerbach Endowed Memorial Scholarship was established in 1992 to honor the memory of Mrs. Auerbach and her years of commitment and service to international students. The award is designated for international students who can prove serious financial need and have demonstrated outstanding academic achievement (G.P.A. of at least 3.25), leadership ability and university/community public service. Applicants must be enrolled at fulltime students (12+ credit generating hours for undergraduate and 9+ credit generating hours for graduate students). Audited hours are not included in the minimum hours required.

ALL INTERESTED STUDENTS MUST SUBMIT THE FOLLOWING:

- The formal application
- Most recent SIUC transcript.
- Two (2) letters of recommendation, including at least one (1) from a current SIUC professor.
- Proof of financial need including a statement from your sponsor indicating unforeseen changes in your original financial support.
- Proof of current income, including all monies received through a graduate assistantship, fellowship, student worker position or other scholarship.

A committee will review all applications, and may request interviews with the finalists, if necessary.

The scholarship is not subject to automatic renewal, although a recipient may apply for the award in subsequent years. Applications will be accepted from April 1 through July 31 the International Students and Scholars office. Questions should be directed to the Associate Director of International Students and Scholars, Carla Coppi, at 453-5774.



Augusta & Jimmy Auerbach Endowed Memorial Scholarship for International Students



Section I:

Name: _____
(Family) (First) (Middle)

SIUC ID #: _____ Citizen of: _____ Phone #: _____
(Country)

Mailing Address: _____

Please circle: Freshman Sophomore Junior Senior Masters PHD

Major department: _____ Date you began studies at SIUC: _____

Date you began current degree program: _____

Date you expect to finish current degree program (month/year): _____

Section II:

Overall (cumulative) GPA: _____

Total credit hours earned at SIUC (do not include transfer credits from other schools): _____

Number of Fall and Spring Semesters completed at SIUC: _____

Number of Summer Semesters completed at SIUC: _____

Section III:

Average income per month by source:

- Family/Friends/Personal Savings ----- \$ _____
- Scholarship/Sponsoring Agency (specify source) ----- \$ _____
- Student Work/Other Assistance from SIUC ----- \$ _____
- Other ----- \$ _____
- TOTAL MONTHLY INCOME ----- \$ _____**

What is your monthly rent payment? _____

Do you have any dependents living with you? If so, how many? _____

Do you own a car? If so, list make _____ and year _____

Do you have a special need for this car? If so, explain: _____

Vehicle registration will be checked with Traffic and Parking

(Please complete information on back)

If you have held a job while at SIUC, please list where, what semesters, and how many hours you work(ed):

have you received any financial awards from SIUC? If so, please list and specify the semester when you received the award(s):

Section IV:

Please explain other pertinent information about your financial resources and obligations that might be helpful in assessing your need. (Attach other sheets if necessary.)

I declare under penalty of perjury that the foregoing is true and correct. I am fully aware that any intentional falsification of information contained herein may result in the denial of the application or loss of aid currently being received. I realize furthermore that this scholarship may be revoked if I fail to meet the designated requirements of being enrolled for a minimum of 12 credit hours for the Fall and Spring semesters.

Signed _____ Date: _____

Name: _____
(Family) (First) (Middle)

SIUC ID #: _____

Statement of Selective Service Registration Status

In order to be eligible for an SIUC Tuition Scholarship you must complete the following draft registration compliance statement:

DRAFT REGISTRATION COMPLIANCE STATEMENT

- I certify that I am not required to be registered with Selective Service because:
- I am female.
- I am in the Armed Services on active duty (note: members of the reserves and the national guard are not considered to be on active duty.)
- I have not reached my 18th birthday.
- I was born before 1960.
- I am a permanent resident of the Trust Territory of the Pacific Islands or the Northern Mariana Islands.
- I am an international student (applicable only to the State of Illinois funded programs.)
- I certify that I am registered with Selective Service.

Student's Signature: _____ Date: _____