



National Arab American Association of Engineers and Architects (NAAAEA)

NAAAEA SCHOLARSHIP APPLICATION FORM

Name _____ Phone No. _____

Address _____

City _____ State _____ Zip Code _____

Email _____

I am currently a AAAEA member: Yes No Date (became member): _____

(Note: you must be a current member in order to be eligible to apply)

Name of Your Local AAAEA Chapter: _____

Academic Major: Engineering Architecture Information Technology

Academic Status – Check appropriate level:

Undergraduate (BS): _____ Graduate (MS): _____ Graduate (PhD): _____

Field of Study: _____

Current Cumulative GPA: _____

Are you a full-time student? _____

Expected Date of Graduation: _____

Are you a TA and/ or RA? _____

Name and phone number of Graduate Advisor: _____

Do you currently have a Scholarship? Provider? _____

I certify that the information furnished herein is true and accurate and do hereby authorize NAAAEA to verify the information. I further pledge that I will continue to support the association to the best of my ability by committing to 20 hours of service to benefit my local AAAEA and / or the National AAAEA.

Signature: _____

Date: _____