SUNY Potsdam Scholarship Application

First Name: ___________________________________________ Last Name: ___________________________________________

Street Address ___________________________________________ Country ___________________________________________

City, State ___________________________________________ Zip Code: ___________________________________________

Phone: ___________________________________________ Email: ___________________________________________

Submitted FAFSA (www.fafsa.ed.gov)?
International should not submit the FAFSA

_____ yes ______ no If no, will submit by ___________________________________________

Expected/Anticipated Major _____________________________

Please print or type

1. Please list any community service activities in which you have participated. Please include the dates you served.

2. Please list extracurricular involvement, clubs, etc. and any leadership roles you have held. Include dates of involvement and positions held.

3. Please list your most recent employment experience, including dates.
Personal Statement

Please write a 250-500 word statement responding to one of the following questions. (Please attach pages to this application)

1. Tell us about yourself, your reasons for applying to SUNY Potsdam, and your reasons for seeking a college education.

2. Write on any topic of importance to you.

The information in this application will be used to help identify SUNY Potsdam Foundation scholarships for which you may qualify. Any scholarship awarded based on information from this form may be cancelled if the information provided by the student is found to be inaccurate.

I have read the above statement and certify that the information I have provided is complete and accurate to the best of my knowledge.

_______________________________
Student Signature

_______________________________
Date

Return to:
Susan Godreau
Scholarship Coordinator
SUNY Potsdam Financial Aid Office
44 Pierrepont Ave
Potsdam, NY 13676
finaid@potsdam.edu
(Tel) 315-267-2162, (Fax) 315-267-3067
Scholarship Recommendation Form

Please be sure to submit **one** completed Scholarship Recommendation with this application.

Applicant: Please select a teacher, guidance counselor, professor or administrator to provide a separate written recommendation in support of your application.

Reference: This is a highly competitive and prestigious scholarship. Please address the criteria listed below in your letter. Be sure to include any additional information that you feel should be considered by the scholarship committee. Please submit your letter of recommendation in a sealed envelope to either the Scholarship Coordinator at the address listed below or the applicant (if given to the applicant, please sign along the flap of the sealed envelope).

You may also fax the letter to 315-267-3067 or email it to finaid@potsdam.edu from your school or college account.
- Relationship to applicant
- Scholastic achievement, intellectual ability
- Ability to analyze a problem and formulate a solution
- Oral communication skills, written communication skills
- Leadership, creativity
- Ability to work effectively with others (including faculty, staff, and students)
- Cooperation, dependability
- Motivation, self-discipline
- Initiative, integrity

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