



Judy Back Study Abroad Scholarship

Student's Name: _____

MU Student ID Number: 901 _____

E-Mail Address: _____

Academic Major/ Minor(s): _____

Class Level: _____ GPA: _____

Study Abroad Program: _____

Study Abroad Program Host Country: _____

Study Abroad Term: Fall _____ Spring _____

Requirements:

The recipients shall be students who are planning to study abroad and who have financial need per standards of the Office of Student Financial Assistance. First preference will be given to students from West Virginia. Second preference to students from states outside of West Virginia.

Application deadline:

- Fall – April 15
- Spring – October 15

Application should be made in the academic term prior to the start date of the study abroad program.

Student Signature: _____ Date: _____

Submit completed application to: Study Abroad Office, Old Main 321B, Marshall University.