

Study Abroad Scholarship Application

Name _____

OBU ID _____ Phone # _____ Box # _____

Study Abroad Program you are applying for _____

Semesters Completed at OBU _____

Expected Graduation Date _____

Academic Major _____

Second Major _____

Minor _____

Cumulative GPA _____

On campus job/work study _____

Extracurricular activities on campus _____

OBU Honors and Awards _____

Date _____

Please include a short essay expressing your financial needs and what qualifies you for receiving Financial Aid. Include any current aid (OBU & Private) that you're receiving. Please include the amount you are requesting. Return this to the Grant Center Office, Lile 101