

## UAS Fisheries Technology Dual-Enrollment Scholarship Application

First & Last Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

What are the last four digits of your Social Security Number? \_\_\_\_\_

What is your birthdate (MM/DD/YYYY)? \_\_\_\_\_

What course are you enrolling in? \_\_\_\_\_

What High School / Home School are you attending? \_\_\_\_\_

Anticipated High School Graduation Year \_\_\_\_\_

Have you previously taken a University of Alaska course?

Yes       No

### Student Consent:

- I certify that the information I have provided on this application is true and correct to the best of my knowledge.
- I authorize University of Alaska Southeast to release my academic and financial aid information to the scholarship selection committee and other third parties for the purpose of scholarship consideration.
- I authorize the University of Alaska or the UA Foundation to share information about me and the name and amount of the scholarship if I am awarded a scholarship based on this application.
- I also give permission to publish and share my thank you letter and photos with alumni and donors by various means.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (or Academic Counselor for Boarding School Students)

\_\_\_\_\_  
Date

### INSTRUCTIONS:

- Only completed applications will be considered.
- Type or print legibly in pen. No pencil.
- Submit with a completed Dual Enrollment Registration form.
- Questions? contact:

UAS Fisheries Technology Program  
907-747-7760  
jamarkis@alaska.edu