

George Chin Memorial Student Scholarship Application

This application is due in the Financial Aid Office by: _____

Student Checklist:

- Completed scholarship application. **Submit to your Financial Aid Office** by the date above.
- 1-page typed essay providing:
 - Insight about your special circumstances/background; and
 - Personal/career goals and strategies for achieving them.

Student's Name: _____ Student DOB: _____

Student's Address: _____

City _____ State _____ Zip _____

Phone: (_____) _____ Email: _____

College or School: _____

Current Degree/Objective (select one): AA/AS BA/BA MA/MS PhD Certificate

Major/Field of Study: _____

Anticipated Graduation Date: _____

1. Will you be enrolled at least half-time (6 credits) and considered a matriculated student at your institution during the Fall semester of the 2023-2024 Academic Year? Yes No
2. If no, indicate where you will be enrolled on an at least a half-time (6 credits) basis and your major:

3. What are your work plans or activities during the Academic Year? (e.g., part-time work, volunteer, etc.)

STUDENT'S STATEMENT OF CANDIDACY:

I authorize NYSFAAA to use any or all the information I provide about my background for publicity purposes and give permission to publish my photo should I be selected for the scholarship. I authorize the Financial Aid Office at my college to release my academic and financial information to the NYSFAAA Scholarship Committee. I further authorize the NYSFAAA Scholarship Committee or Financial Aid Office to access the National Student Loan Data System (NSLDS) to determine my total outstanding federal loans.

Student's Signature _____ Date _____

This application must be submitted to your Financial Aid Office for completion and submission by the date indicated above.



2023-2024 George Chin Memorial Scholarship

TO BE COMPLETED BY THE FINANCIAL AID OFFICE

FA Office Checklist:

- Completed student application.
- Completed financial aid budget sheet and attestation (this page).
- Written FA Office Recommendation. *The nominating FA Administrator must be a member of NYSFAAA.*
 - Statements supporting this student’s candidacy and why you believe the student should receive an award.
 - Any extenuating circumstances that the scholarship committee should take into consideration.

College or School: _____

Student’s Name: _____

Sector (check one): Public 2-year Private/Proprietary 2-year Public 4-year
 Private 4-year Graduate/Professional

ONLY ONE STUDENT MAY BE NOMINATED BY EACH INSTITUTION PER DEGREE LEVEL

Student Budget	2023-2024	Student Resources	2023-2024
Tuition & Fees	\$ _____	EFC	\$ _____
Books, Course Materials, et. al	\$ _____	State Grants	\$ _____
Transportation	\$ _____	Federal Pell Grant	\$ _____
Misc. Personal Exp	\$ _____	Institutional	\$ _____
Living Expenses	\$ _____	Grant/Scholarships	_____
Other	\$ _____	Other	\$ _____
Total COA	\$ _____	Grant/Scholarships	_____
		Total	\$ _____

Total Outstanding Loan Balance from NSLDS: \$ _____ CUM GPA _____ Cum credits _____

Year in College (check one) FR SO JR SR GR

I, _____ (FA Administrator) recommend that the above student be considered as a candidate for the 2023-2024 NYSFAAA Scholarship. Please note, previous recipients are not eligible.

Signature of Financial Aid Administrator (_____) _____
Office Telephone Number Date

THE STUDENT’S APPLICATION, ESSAY AND ADMINISTRATOR’S VERIFICATION FORM MUST BE SUBMITTED ELECTRONICALLY NO LATER THAN September 15, 2023:

Daniella Steuer, Co-Chair –NYSFAAA Scholarship Committee
Stonybrook University
Email: Daniella.Steuer@stonybrook.edu

Further information and explanations may be found on the NYSFAAA website in the “Scholarship” tab.