

**RISK MANAGEMENT & INSURANCE
DEPARTMENTAL SCHOLARSHIP APPLICATION**

Name: _____ Email Address: _____

Local Mailing Address: _____

Local Phone: _____

FSU ID #: _____ Hometown/County: _____

Other Major(s)/Minor(s): _____

Overall GPA: _____ Major GPA: _____ Hours Completed in Major: _____

RMI Classes Taken/Currently Taking:

| Class | Instructor | Grade or 'NA' If Taking |
|-----------|------------|-------------------------|
| RMI _____ | _____ | _____ |
| RMI _____ | _____ | _____ |
| RMI _____ | _____ | _____ |
| RMI _____ | _____ | _____ |
| RMI _____ | _____ | _____ |
| RMI _____ | _____ | _____ |

Expected Semester and Year of Graduation: _____

Career Objective(s): _____

What made you decide to become an insurance major? _____

Applicants please be advised that receipt of this scholarship requires your attendance at the 2010 Leadership & Scholarship Dinner in October of 2010. Barring unavoidable circumstances, you will be required to attend the event.

APPLICATION DEADLINE: Thursday, November 12, 2009 by 4 pm

