

KIIS SCHOLARSHIP APPLICATION  
Fall Semester Programs

ONLY TYPED APPLICATIONS WILL BE CONSIDERED

COMPLETE APPLICATIONS MUST BE RECEIVED BY THE STUDENT'S KIIS CAMPUS  
REPRESENTATIVE NO LATER THAN APRIL 1, 2004.

KIIS PROGRAM \_\_\_\_\_

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_

PRESENT MAILING ADDRESS \_\_\_\_\_  
\_\_\_\_\_

PRESENT TELEPHONE NUMBER \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY NO. \_\_\_\_\_

MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

PRESENT COLLEGE OR UNIVERSITY \_\_\_\_\_

MAJOR \_\_\_\_\_ MINOR \_\_\_\_\_

GRADE POINT AVERAGE: OVERALL \_\_\_\_\_ MAJOR \_\_\_\_\_

LIST FOREIGN LANGUAGE COURSES YOU HAVE HAD OR OTHER FOREIGN LANGUAGE  
EXPERIENCE.  
\_\_\_\_\_  
\_\_\_\_\_

IT IS MY INTENTION TO RETURN TO \_\_\_\_\_ IN THE SPRING OF  
2005.

(COLLEGE OR UNIVERSITY)

\_\_\_\_\_  
STUDENT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CAMPUS REPRESENTATIVE'S SIGNATURE

\_\_\_\_\_  
DATE