

HUNTER

Bloch Family Travel Abroad Award

[*] Must demonstrate financial need [*] 3.2 GPA or Higher

Name _____ EMPLID _____

Address _____

Phone _____ Email : _____ D.O.B. _____

Major: _____ GPA: _____

Program Abroad _____ Term _____

Program Fee: _____ (indicate what is included i.e. housing, meals, activities, overnight excursions, books, etc.)

Tuition Fee: _____

Did you complete a FAFSA application? _____

List scholarships and forms of financial assistance **you have applied** for:

List any scholarships or financial aid **you have been awarded** including Macaulay Opportunities Fund: _____

Expected Personal Financial Contribution? _____

***All awardees must submit a brief essay detailing their experience abroad and how the scholarship award contributed to the experience.

Applicant Signature _____

Date _____
