

Smeal Community Engagement and Development Grant Application

In accordance with the Family Educational Rights and Privacy Act of 1974 (FERPA), I hereby authorize the Pennsylvania State University to release personally identifiable information from my education records, including but not limited to major, activities, grade point average, financial need information, and other information to donors who will be considering me for the scholarship for which I have applied. This release of information is necessary for the selection process for the award. I also authorize the University to periodically release personally identifiable information to the scholarship donor for the purpose of updating the donor on my progress at the University. I understand that (1) I have the right not to consent to the release of my education records under FERPA; (2) I have the right to receive a copy of such records upon request; (3) and that this consent shall remain in effect until revoked by me, in writing, and delivered to the Smeal College of Business Office of International Programs.

I understand and give my authorization	I understand and do not give my authorization
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Applicant Information					
Full Name:	Last	First	М.І.		
Home Address:					
	Street Address		Apartment/Unit #		
-	City	State	ZIP Code		
PSU ID #:		PSU Email Address:			
Program Information					
Name & Lo Program: Website: # Weeks/H	cation of				

Essay Question

On a separate page, please explain what motivated you to pursue the program. How do you foresee the experience impacting the local people you work with, and your future plans and career decisions?

* * * * Attach a copy of your updated resume to the application.