OMRON Foundation
Electronic Engineering Scholarship

Eligibility:

- Full-Time Electrical Engineering Student
- Junior or Senior Standing
- Demonstrated Financial Need
- Completion of a one-page statement summarizing your educational and career goals.

DEADLINE: March 1, 2008

Return completed application and supporting documents to the Department of Electrical Engineering, Office EB 330.
OMRON FOUNDATION
ELECTRONIC ENGINEERING SCHOLARSHIP APPLICATION

This application form must accompany the completed Financial Aid Form (FAF). Financial need has to be demonstrated for the OMRON Scholarship.

Name: ____________________________________________________________________________________

Last      First      Middle

Address: __________________________________________________________________________________

Number, Street and Apartment Number   City   State            Zip Code

Phone: _________________________

Social Security Number: _________________________

Age: _______    Birth Date: ________________    Sex: M ______  F ______

GPA at Community College: ___________    GPA at NIU: __________

NIU Student Status:  Junior ______  Senior ______

Number of Hours Enrolled this Semester: __________

Planned Graduation Date: ____________________________

Name of Parent or Guardian: ______________________________________

Relationship: _________________________

Address: __________________________________________________________________________________

Street      City   State       Zip Code

Phone: _________________________

Cumulative GPA: __________ (4.0 Scale)

Please describe your educational and career goals on a separate sheet of paper.

Return form and application materials by March 1, 2008 to:

Jennifer K. Withers, Staff Secretary
Department of Electrical Engineering
Engineering Building - Office 330, NIU
DeKalb, IL  60115
Telephone: 815-753-1290, Fax: 815-753-1289
E-Mail Address: jthomas@ceet.niu.edu
Please return this form directly to the Student Financial Aid Office, Attn: Dorothy Razniewski

FAMILY EDUCATION RIGHTS AND PRIVACY ACT OF 1974

I, _____________________________, do hereby give permission to release the following financial aid records:

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

I request that the above record(s) be released to the Department of Electrical Engineering for the purpose of being considered for the OMRON Scholarship.

Student’s Name: _____________________________________________________________

Address: ____________________________________________________________________

SSN: _______________________________________________________________________

Date: _______________________________________________________________________

SIGNATURE: ___________________________________