Florida Agricultural and Mechanical University
Tallahassee, Florida  32307-3100

Division of Student Affairs
Office of Financial Aid

MARY MCLEOD BETHUNE SCHOLARSHIP CHALLENGE GRANT APPLICATION
Application Deadline: August 12

Section A: Applicant’s Identification Information

FAMU Student ID ____________________________

Last Name ___________________ First Name ___________________ MI ___________

Permanent Address __________________________ City __________________ State _____ Zip _____

Home Phone ___________________________ E-mail Address _______________________________

I am applying for financial aid for the 20____ - 20_____ academic year during which I will be classified as a:

Freshman _______ Sophomore _______ Junior _________ Senior _______

Section B: Initial Applicant Information (ONLY)

1. I am a Florida resident. Yes_____ No______ (See eligibility criteria in program description)

2. High School GPA ______________

3. I completed a current FAFSA application. Yes___ No___ (See eligibility criteria in program description)

Awards are provided to eligible applicants without discriminating on the basis of race, sex, national origin, marital status or handicap.

Section C: Renewal Applicant Information (ONLY)

1. I am a Florida resident. Yes _____ No ______ (See eligibility criteria in program description)

2. Cumulative GPA ________________ (must be at least 3.00, probation GPA 2.75)

3. I completed a current FAFSA application. Yes ___ No ____ (See eligibility criteria in program description)

Awards are provided to eligible applicants without discriminating on the basis of race, sex, national origin, marital status or handicap.

IMPORTANT: DO NOT attach any supplemental information, such as transcripts or correspondence to this application.

COMPLETE APPLICATION AND MAIL TO:

FLORIDA AGRICULTURAL & MECHANICAL UNIVERSITY
OFFICE OF FINANCIAL AID
101 FOOTE HILYER ADMINISTRATION CENTER
TALLAHASSEE, FLORIDA 32307

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