



FERRIS STATE UNIVERSITY

QUALITY AIR ANNUAL SCHOLARSHIP

TO BE COMPLETED BY SCHOLARSHIP APPLICANT:

Last Name	First Name	Middle Initial	
Campus Address	E-Mail	Phone	
Permanent Street Address	City	State	Zip Code
Student ID #	Program of Study		

Major GPA: _____

Total Credits Earned: _____

Your completed application **must** be accompanied by the following, and submitted to the HVACR Department Scholarship Committee, 605 S. Warren, GRN 227, Big Rapids, MI 49307:

- A personal resume
- The scholarship shall be awarded to a full-time sophomore student majoring in Heating, Ventilation, Air Conditioning and Refrigeration Technology.
- The recipient shall have a minimum 3.2 GPA at the time of application.
- Preference shall be given to students with permanent state residence in following counties within the state of Michigan: Berrien, Cass, St Joseph, Branch, Hillsdale, Van Buren, Kalamazoo, Calhoun, Jackson, Allegan, Barry, Eaton, Ingham, Ottawa, Kent, Ionia, Clinton, Muskegon, Montcalm, Oceana, Newaygo, Mecosta, Mason, Lake, Osceola, Gratiot, Livingston, and Shiawassee.
- Applicants shall submit two (2) letters of recommendation with scholarship application.
- Financial need is not a criterion.

I affirm that the information I have provided on this application is complete, accurate, and true to the best of my knowledge. I understand that furnishing false information may result in not being considered or revocation of financial aid at a later date.

Signature of Applicant

Date