

*Florida Institute of Technology* **2017 APPLICATION FOR UNDERGRADUATE AND GRADUATE** **OUTSTANDING STUDENT OF THE YEAR AWARD**

**APPLICATION REQUIREMENTS:**

- **Complete ALL sections (A–D)** of this application.
- **PRINT, SIGN (SECTION D) AND SUBMIT application to your academic department by Monday, February 6, 2017.**
- **Minimum** GPA of 3.0.
- **Dual-major students** must complete two separate applications to be considered for an award in both majors.
- **Include all courses** taken through Fall 2016 as well as transfer credit and credit by examination as of February 2017, not including courses in progress.

**SECTION A** *Award Eligibility for Undergraduates: **SOPHOMORE** (30–55 credits) **JUNIOR** (56–84 credits) **SENIOR** (85 or more credits)*

Award applying for:  Outstanding Sophomore  Outstanding Junior  Outstanding Senior  Outstanding Graduate

**SECTION B** *Applicant Information*

Florida Tech Student Number \_\_\_\_\_

Name  Mr.  Ms. \_\_\_\_\_

Local Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone Number \_\_\_\_\_ FIT Email Address \_\_\_\_\_

Major \_\_\_\_\_ Major Code \_\_\_\_\_

Expected Graduation Term Year \_\_\_\_\_ Credit Hours \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

**SECTION C** *Accomplishments and Goals*

Please attach a separate document describing your accomplishments and goals, for example memberships/offices held in student organizations, honor societies, professional and voluntary organizations; previous honors and awards received; research projects and publications; participation in athletics or ROTC; employment (on and/or off campus); and career goals and objectives.

**SECTION D** *All honors recipients will be notified via my.fit.edu email no later than March 16, 2017.*

Should you be selected to receive an award, please make arrangements to attend the Spring 2017 Honors Convocation, Thursday, April 13, 2017 at 3:30 p.m. in Gleason Performing Arts Center. I plan to attend:  Yes  No

**I verify that all information listed above is correct to the best of my knowledge.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**DEPARTMENTAL USE ONLY**

**TO THE DEPARTMENT COMMITTEE:** Please complete all information below. Copy both pages of this application for your records and return the original signed application to: Judy Thompson, Office of the Vice President for Student Affairs, no later than Monday, February 27, 2017.

FULL NAME OF RECIPIENT \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

AWARD:  Outstanding Sophomore  Outstanding Junior  Outstanding Senior  Outstanding Graduate

By signing below, I acknowledge that the recipient of this award meets all required criteria as determined by the university and that all information presented on this application is correct.

Name (*print*) \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_