

Boukai Family Foundation UC Irvine Undergraduate Student in Social Sciences Award

One award, in the amount of \$2,000.00 will be given to a full-time student in the School of Social Sciences during the 2012-2013 academic school year.

Student Requirements for Consideration:

- Applicant must be a full-time student during the 2012-13 Academic Year.
- According to the intent of the award, the applicant must be a majoring in any one of the majors within the School of Social Sciences: Anthropology, Psychology (Cognitive Science), Philosophy, Economics, Quantitative Economics, Business Economics, International Studies, Sociology, Social Science, Chicano Latino Studies, Political Science, or Social Policy & Public Service.
- Applicant must have a G.P.A. of at least a 3.0; submission of unofficial transcript along with this application is required.
- Applicant must be a U.S. Citizen.
- Applicant must complete application, including a one-page personal statement discussing his/her educational accomplishments and goals; community service experiences; personal experiences that demonstrate involvement in the Arab American and Muslim communities and how he/she has advocated for Islam and the Arab culture and community; and personal circumstances that demonstrate financial need.
- Award recipients will be required to attend an award reception. The purpose of this reception is to recognize students and introduce them to the Boukai family.

Recipient Selection

A representative from the Boukai Family Foundation will serve on the selection committees with university representatives.

SUBMISSION DEADLINE

Please submit your completed application and all supporting documents electronically to *Teresa Neighbors* at <u>scholarships@mail.ss.uci.edu</u> no later than 5:00 p.m. Friday January 18, 2013.

APPLICANT INFORMATION			
Name:		Declared Major:	
UCI Student ID#:		GPA: Gender: Male Female	
Local Address:		Expected Date of Graduation:	
City:		What is your Class Standing? <>	
State:	Zip Code:	Cell Phone Number:	
UCI E-Mail:			

Please list two faculty members who are familiar with your academic work at UC Irvine.

FACULTY REFERENCE		
Faculty Name:	UCI E-mail:	
Title:	Department:	
Office:	Office Phone Number:	
FACULTY REFERENCE		
Faculty Name:	UCI E-mail:	
Title:	Department:	
Office:	Office Phone Number:	

Signature:



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FOR REVIEW COMMITTEE USE ONLY			
Date Submitted:	Review by:		
Awarded? 🗌 Yes 🗌 No	Award Date:		