



Application for Student Financial Support – Summer School in France 2016

APPLICANT INFORMATION

First Name _____ MI _____ Last Name _____

Street Address _____

City _____ State/Province _____

Postal Code _____ Country _____ Phone Number _____

Email Address _____

Check One: I am a graduate student undergraduate student

Check One: I am a member of ACerS yes no

Name of University/Institution _____

Major _____ Anticipated Degree _____

Expected Graduation Date _____ Country of Citizenship _____

Anything else you would like us to know when considering your application:

Submit your completed application, letter of interest,
and faculty recommendation by **March 15, 2016**,
to Belinda Raines at braines@ceramics.org