

Boston University Metropolitan College

ALEXIS GAVRAS GRADUATE SCHOLARSHIP APPLICATION

Please answer the following questions, and provide documentation where requested.

Section I: Biographical Information		
Name (Last, First):		
Home (Mailing) Address: City	State	Zip
Local Address (If Different): City	State	Zip
Telephone: Home	Mobile	
What degree program at MET are you enrolled/	enrolling in (e.g., Master of Science in Comput	er Science, etc.)?
When will/did you BEGIN your graduate degree	program at Boston University? (Month/Year)	/
If you have completed coursework in your program at Boston University?	ram, what is your current cumulative grade poin	nt average (GPA) in the graduate
Section II: Background		
The Alexis Gavras Graduate Scholarship is intencountry of Greece or born to one or more Greek,		escent (i.e., either born in the
Are you a native of (born in) Greece? Yes	_ No	
Do you identify as Greek-American? Yes	_ No	
In 500 words or fewer, explain your direct connection (You may attach 1-2 pages, if desired.)	ection to the country of Greece and/or the Gre	ek-American community in the U.S
Have you attached the above essay to be include	ed with this application? Yes No	
Have you completed a bachelor's degree? Yes _	No	
Provide the name(s) and city/state/country of e (Attach additional pages, if needed.)	each institution(s) from which you earned an u	



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Please answer the following questions, and provide documentation where requested.

Section III: Financial Need

The Alexis Gavras Graduate Scholarship is intended for graduate students with demonstrated financial need. The following steps and questions will help us in assessing your need for this purpose only.

All students* applying for this scholarship must complete the current year's Free Application for Federal Student Aid (FAFSA) online at **fafsa.ed.gov**. You must select Boston University (federal school code 002130) as the school to receive your data.

*If you do not have, or are not eligible for, a U.S. Social Security Number (SSN), we will not be able to use the FAFSA to assess your financial need. Contact MET Graduate Financial Aid (**finanaid@bu.edu**) for an Income Verification Form to be used instead. All applicants who are eligible for a Social Security Number must file the FAFSA and provide their SSN as instructed, to be considered for this award.

Have you completed the Free Application for Federal Student Yes No	Aid (FAFSA) for the current and/or upcoming academic year?	
Provide your Social Security Number:		
Note: For added security, you may instead provide your SSN by phone or in person. Call MET Graduate Financial Aid at 617-358-4072 (internationally, dial +1-617-358-4072) or email finanaid@bu.edu for assistance.		
Section IV: Sign and Submit Your Application		
All information I have provided above and as supporting documental I meet the criteria to be considered for the Alexis Gavras	mentation is true and accurate to the best of my knowledge. I believe Graduate Scholarship.	
Signature:	Date:	
Submit your completed application to:		
Boston University Metropolitan College		
Graduate Financial Aid		
ATTN: Director		
Email to finanaid@bu.edu or fax to 617-353-4190.		

Littali to ililaliala@ba.eda or lax to 017-3.

Call 617-358-4072 (international: +1-617-358-4072) for additional information.