



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

### **Section I: Biographical Information**

Name (Last, First): \_\_\_\_\_ BU ID#: \_\_\_\_\_

What degree program at MET are you enrolled/enrolling in? ☐ Master of City Planning ☐ Master of Urban Affairs

When will/did you BEGIN your graduate degree program at Boston University? Semester: \_\_\_\_\_ Year: \_\_\_\_\_

Are you part-time or full-time? ☐ Part-time ☐ Full-time

### **Section II: Background**

The Bill & Charlene Burges Graduate Scholarship is intended for domestic graduate students (US citizens and permanent residents only) who are or will be enrolled in either the Boston University Master of City Planning or Master of Urban Affairs program.

① **Required:** In 250 words or fewer, explain your education and career goals and how this scholarship will help you achieve them. (Attach a one-page document.)

② **Required:** In 250 words or fewer, explain how this scholarship will alleviate your financial burden. (Attach an additional one-page document.)

③ **Optional:** In 200 words or fewer, please share any additional information you believe is relevant to your scholarship application that has not been covered in the previous questions. (Attach a third one-page document.)

### **Section III: Financial Need**

The Bill & Charlene Burges 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: [studentaid.gov/h/apply-for-aid/fafsa](https://studentaid.gov/h/apply-for-aid/fafsa). Select Boston University (federal school code 002130) to receive your data.

Have you completed the Free Application for Federal Student Aid (FAFSA) for the current and/or upcoming academic year?  
☐ Yes ☐ No

### **Section IV: Sign and Submit Your Application**

All information I have provided above and as supporting documentation is true and accurate to the best of my knowledge. I believe that I meet the criteria to be considered for the Bill & Charlene Burges Graduate Scholarship.

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

### **Submit your completed application to:**

Boston University Metropolitan College  
Department of Applied Social Sciences  
ATTN: Dr. Yesim Sungu-Eryilmaz, Program Director  
Email to: [cityplan@bu.edu](mailto:cityplan@bu.edu)

### **Contact [finanaid@bu.edu](mailto:finanaid@bu.edu) for questions or more information.**

*Please note BU/BMC employees are not eligible for this scholarship.*