



NEIL GRIFFIN COLLEGE OF BUSINESS

P.O. Box 970, State University, AR 72467 | o: 870-972-3035 | f: 870-972-3744

Neil & Gena Griffin Internship Scholarship Application

Description: Made possible by the generosity of Neil and Gena Griffin, the Neil Griffin College of Business offers scholarships to help defray the costs of internships for those who meet the following criteria:

- 1) Majoring in a program in the Neil Griffin College of Business
- 2) Enrolled as a full-time student during the regular academic year (Fall/Spring); the internship can occur during the Fall, Spring, or Summer terms
- 3) Enrolled to receive credit for an internship through the Neil Griffin College of Business
- 4) Demonstrate significant financial need

Priority for this scholarship is given to students participating in unpaid internships, internships with non-profits, and internships with small businesses.

Deadlines: Application deadlines are rolling, depending on which semester in which your internship takes place. If the program takes place during...

- The Fall semester, applications are due by August 15th of that year.
- The Spring semester, applications are due by December 1st of the prior year.
- The Summer semester, applications are due by May 1st of that year.

If you are unsure of which deadline applies to you, contact Dr. Hilary Schloemer (HSchloemer@AState.edu).

Application Requirements for Scholarship Consideration

- 1) Complete the below application, including the signed affirmation at the bottom
- 2) On a separate sheet, provide the following information: (a) Name of organization where you are interning and when you will be interning; (b) What are your roles and responsibilities for the internship; and (c) What do you hope to learn from this internship experience
- 3) Without exceeding 500 words, describe your long-term, post-college goals, and how receiving this scholarship will assist you in achieving your goals.

NAME: _____ MAJOR(S): _____

STUDENT ID#: _____

A-STATE EMAIL ADDRESS: _____ DATE OF BIRTH: _____

SELECT ONE: I am a ___ US Citizen ___ US National ___ International Student

Expected Collegiate Graduation Date: _____

I affirm that all of this Application, including the REQUIREMENTS FOR INTERNSHIP SCHOLARSHIP CONSIDERATION that is being submitted with this Application, is my own work and true and accurate to the best of my knowledge and belief. Additionally, I grant faculty representatives of the Neil Griffin College of Business the right to access information to confirm my financial need.

Applicant Signature: _____ Date: _____

Turn in your application to Dr. Dwayne Powell via email (DPowell@AState.edu).