OMRON Foundation
Electronic Engineering Scholarship

Eligibility:

- Full-Time Electrical Engineering Student
- Junior or Senior Standing
- Demonstrated Financial Need
- Completion of a one-page statement summarizing your educational and career goals.

DEADLINE:
Friday, October 13, 2006

Return completed application and supporting documents to the Department of Electrical Engineering, Office EB 330.
OMRON FOUNDATION
ELECTRONIC ENGINEERING SCHOLARSHIP APPLICATION

This application form must accompany the completed Financial Aid Form (FAF). Financial need has to be demonstrated for the OMRON Scholarship.

Name: ____________________________
   Last                      First                      Middle

Address: __________________________
   Number, Street and Apartment Number   City   State   Zip Code

Phone: ____________________________

Social Security Number: ________________

Age: _______ Birth Date: ________________ Sex: M _____ F _____

GPA at Community College: _______ GPA at NIU: _______

NIU Student Status: Junior _____ Senior _____

Number of Hours Enrolled this Semester: _______

Planned Graduation Date: ______________________

Name of Parent or Guardian: ________________________________

Relationship: ________________________________

Address: ____________________________
   Street   City   State   Zip Code

Phone: ____________________________

Cumulative GPA: _______ (4.0 Scale)

Please describe your educational and career goals on a separate sheet of paper.

Return form and application materials by Friday, October 13, 2006 to:

Jennifer K. Withers, Staff Secretary
Department of Electrical Engineering
Engineering Building - Office 330, NIU
DeKalb, IL 60115
Phone: 815-753-1290, Fax: 815-753-1289
E-Mail Address: jithomas@eceet.niu.edu
Please return this form directly to the Student Financial Aid Office, Attn: Dorothy Razniewski

FAMILY EDUCATION RIGHTS AND PRIVACY ACT OF 1974

I, __________________________, do hereby give permission to release the following financial aid records:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

I request that the above record(s) be released to the Department of Electrical Engineering for the purpose of being considered for the Omron Scholarship.

Student’s Name: __________________________________________________________

Address: _______________________________________________________________

SSN: ___________________________________________________________________

Date: ___________________________________________________________________

SIGNATURE: _____________________________________________________________