

EOA Foundation Scholarship Nomination Form

To be completed by TRIO/EOP EOA Member

NOMINATOR INFORMATION

**Nominator MUST be a current member of EOA for applicant to be considered.*

Are you a current EOA member? Yes No (Chapter Chair will verify)

Nominator's Name (print) _____ Email _____

Host Institution _____ Program _____

Phone #1 _____ #2 _____ Fax _____

Address _____

City _____ State _____ Zip _____

EOA Chapter Name _____

Nominator's Signature _____ Date _____

NOMINEE INFORMATION

Applicant Name _____

First Generation Low Income Disability (SSS) Underrepresented group (McNair)

High School _____ -or- College _____

Check here if high school student taking some/all college credits. Cumulative GPA _____

Letter of Recommendations: Please write a rationale for your nomination of this applicant. Consider the applicant's participation in co-curricular activities and community service, the applicant's academic achievement, your personal interactions with the applicant and your insights into his/her abilities, potential, character and leadership skills. Also indicate the applicant's impact on your program and other students, as well as their potential vision to carry out the ideals of TRIO. Please limit your endorsement to **two double-spaced typed pages**.

Once complete, save this form and your letter of recommendation as two separate PDF documents for your student applicant to upload their application materials online. If you prefer not to share your letter of recommendation with your applicant, you may wish to have your student send their application materials to you to submit on their behalf or meet with your student to submit the application together.



EDUCATIONAL
OPPORTUNITY
ASSOCIATION