The Aage and Margareta Moller Endowed Scholarship is a declaration of their support for The University of Texas at Dallas. Recipients will be chosen based on financial need. A Free Application for Federal Student Aid (FAFSA) is not required to determine financial need, but a financial needs analysis must be completed in cases where students are unable to submit a FAFSA. This scholarship is administered under the direction of the Dean for Undergraduate Education. A preference will be given to undergraduate students, although graduate students may be considered based on compelling financial need. Preference will be given to students with the greatest financial need and for students who do not meet criteria for other sources of financial aid. Scholarships will be awarded competitively and in the minimum amount of (currently) $1,000.

Specific requirements for the award include:

1. This scholarship application, completed in full with signature.
2. Letters of recommendation from at least two current UTD faculty members or UTD Academic Advisors who know the student and can attest to the applicant’s educational plan(s) and goal(s).
3. Personal narrative statement.

Only COMPLETE applications received by the Financial Aid Office prior to the posted deadline will be considered. Applicant will receive decision notification by UTD email and U.S. mail.

Please complete the following:

__________________________________________________________
Last Name     First Name     M.I.     UTD-ID

Local Street Address          City          State          Zip

(  )___________________ (  )___________________  UTD Email address
Home Phone          Work Phone

Citizenship: [ ] US Citizen [ ] U.S. Permanent Resident [ ] Student Visa ______ visa type

UTD Academic Demographic Information

Current Academic Level: [ ] Freshman [ ] Sophomore [ ] Junior [ ] Senior [ ] Masters [ ] Doctorate

Major: __________________________________________________________

Other Information

List any scholarships you will be receiving for the current academic year.

___________________________________________________________
Are you employed at UTD? [ ] Yes  [ ] No
If yes, check one or both:  [ ] Teaching Assistant/ Research Assistant [ ] Other
If yes, indicate monthly gross: $_____________

Are you currently employed off campus? [ ] Yes [ ] No
If yes, check one: [ ] Full-time  [ ] Part-time Hrs./week _____
If yes, list employer: ____________________________________________ List position: ____________________________________________
If yes, check one: [ ] Full-time  [ ] Part-time Hrs./week _____

**Personal Narrative**

*Please complete and staple to this application a one-page statement telling us why you feel you should receive this scholarship and how this scholarship will enhance or assist with your educational goals at UTD. Tell us about your academic and professional goals, and your work experience. Include your name and UTD-ID on your narrative page.*

**U.S. Military Service**

Please summarize your military duty, including the period during which you served actively, your last rank, the general nature of your tour of duty, and in what capacity you served, adding any pertinent information not included in your personal narrative.

___________________________________________________________________________

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**Certification**

I certify that the information provided in this application is complete and accurate. I understand that providing false or misleading information on this application or other documentation may disqualify me for consideration of my application or disbursement of scholarship funding. Further, I understand that the information will be used by donors, the Committee on Student Fellowships and Scholarships, or other recognized university scholarship committee(s) to evaluate and award scholarships. I understand that I will need to provide the scholarship committee with a narrative of my educational experiences and the value added to my educational goals. I authorize the University of Texas at Dallas to release to the donor(s) and/or the media any information concerning scholarship(s) I may receive.

**By signing this application, I agree to release my records to UT Dallas/Donor to use application material for scholarship purposes. I understand this authorization is valid one time for a single release of information. Family Education Rights and Privacy Act of 1974(FERPA)**

___________________________________________________________________________

Student’s Signature  __________________________ Date  __________________________