Faculty & Staff Scholarship Application
2023-2024 *(Fall 2023, Spring 2024, Summer 2024)*

CU Scholarships
UNIVERSITY OF COLORADO **BOULDER**

Name: _____   **ID:** _____
Employee's Name (Last, First, M.I.)   Employee's ID (6 digits, not SSN or Buff One card number)

Faculty and staff members may submit one application per academic year for each dependent student.

1. Employment classification (you can select more than one):

☐ Faculty   ☐ Staff

2. What term are you applying for?

◯ Fall 2023 (July 1 deadline)   ◯ Spring 2024 (Dec. 1 deadline)   ◯ Summer 2024 (May 1 deadline)

Parent/Employee Information
Employment status: ◉ Working   ◯ Retired   ◯ Deceased
Department name:
Relationship to student:
Employee's phone number:
Employee's email:

Student Information:
Student's name:
Institution student plans to attend:
Student's Institution Identification Number:
Career level: ◯ Undergraduate   ◯ Graduate
Enrollment Status: ◯ Degree   ◯ Continuing Education   ◯ Certificate

By signing this form, I certify that all the information provided is complete and accurate.

_____   _____
Employee's signature   Date

Electronic and typed signatures are not acceptable.

Please submit your form by mail or email to scholarships@colorado.edu
77 UCB • Boulder, Colorado 80309-0077 • www.colorado.edu/scholarships

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