



## APPLICATION FOR GRADUATE FOOD SCIENCE SCHOLARSHIP

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Submit this completed application by **email as a PDF** to **Ms. Debbie Koch (dmarion@sebs.rutgers.edu), Room 107, Food Science Bldg., Rutgers University**, no later than **January 11, 2019**. Applications filed after the deadline will not be considered! Please remember to have paid your IFT membership dues (including NY/CNJ IFT Section dues) for 2018-19 to be considered for this scholarship. An email poll will be circulated one week prior to the deadline to sign-up for interviews.

DEGREE SOUGHT: M.S.  PH.D.  NUMBER OF YEARS IN FOOD SCIENCE PROGRAM: \_\_\_\_\_

**PLEASE TYPE**

NAME: \_\_\_\_\_ CONCENTRATION: \_\_\_\_\_

DATE DEGREE EXPECTED: \_\_\_\_\_ GRADE POINT AVG: \_\_\_\_\_

SCHOOL ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
CITY STATE ZIP CODE

HOME ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
CITY STATE ZIP CODE

EMAIL: \_\_\_\_\_

On a separate sheet of paper, **write a brief biographical paragraph**; include your career goals and your reason for applying for this scholarship. **Also, attach a copy of all your undergraduate college or university transcripts of work completed to date.** (An unofficial copy of your current transcript or grade reports signed by your advisor is acceptable.\*\*\*) A list of courses in which you are currently enrolled should be included.

**\*\* email notification by your advisor to Ms. Debbie Koch can be substituted for the signature**

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***COLLEGE ACADEMIC AWARDS OR HONORS (including publications):***

***MEMBERSHIP AND OFFICES HELD:*** (Include membership in national IFT if applicable.)

***EXTRACURRICULAR ACTIVITIES:*** (Including athletics, band, etc.):

***WORK EXPERIENCE:*** (If any):

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**DATE**

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**APPLICANT'S SIGNATURE**

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Use this page to outline your proposed field of research and methods of approach. **This OUTLINE MUST BE APPROVED AND SIGNED BY THE DEPARTMENT HEAD OR MAJOR PROFESSOR.**  
(Note: *email notification by your advisor to Ms. Debbie Koch can be substituted for the signature*)

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**The above, proposed plan of research is approved and accepted.**

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DATE

SIGNATURE OF DEPARTMENT HEAD OR MAJOR PROFESSOR - PRINT NAME