

19-20 Professor Louis S.J. and Margaret Simeone Scholarship Application – Mathematics Majors

This scholarship was established by Professor Louis Simeone, a distinguished professor in the UMD mathematics department. He served as the department chair for many years, and was named Teacher of the Year in 1972. Professor Simeone taught three generations of mathematics students over thirty-eight years, retiring in 1984. He encouraged practical application of mathematics, and helped guide students to careers in engineering.

Eligibility Criteria:

- **Must be majoring in a Mathematics field**
- **Must possess a GPA of 3.2 or better**
- **Must demonstrate financial need by completing a Free Application for Federal Student Aid before March 1, 2019**

Please complete the following.

_____	_____	_____	_____
Last Name	First Name	Student ID Number	
_____	_____	_____	_____
Permanent Street Address	City	State	Zip
_____	_____	_____	_____
Phone	UMD Major/Minor	Admit Term	
_____	_____	_____	
Expected Graduation Term	Name of High School		

The following items are also required. Incomplete applications will not be considered.

- What is your current academic level? Freshman Sophomore Junior Senior
- A 600-word essay describing how you use applied mathematics in your course work, or describing examples of projects you have completed using mathematics
- Unofficial UMD transcript. Can be obtained through COIN or at the Registrar's Office
- Letter(s) of recommendation from your faculty advisor or others who are familiar with your work

I authorize release of my relevant demographic, academic and financial aid information to the selection committee and/or fund donor. I understand that I must file the 2019-20 Free Application for Federal Student Aid (FAFSA) by March 1, 2019, to be considered for scholarship assistance.

Printed Name

Signature

Date

Please return completed application materials by **March 1, 2019**, to the Financial Aid Office, University of Massachusetts Dartmouth, Foster Administration Building Room 105, 285 Old Westport Rd. Dartmouth, MA 02747 or financaid@umassd.edu

For Office Use Only
Date Received _____ Initials _____
Complete: Y N Coded: Y N