

Ralph and Joan Hovel Memorial Scholarship for Study Abroad (Berlin, Germany / Vienna, Austria) Fall 2025 Application

| USC ID: | | Nam | e: | | | |
|---------------|------------------------------|----------------------------|-------------------|----------|------------------|--------|
| | | | Last | | First | MI |
| Class Standii | ng in Fall 2025 : | Freshman | Sophomor | e | Junior | Senior |
| Declared Ma | ajor(s): | | | | | |
| Declared Mi | nor(s): | | | | | |
| Expected Gr | aduation: May | Aug Dec. of 2 | 0 | First S | Semester at USC: | |
| Current Con | tact Information: | | | | | |
| | | | | | | |
| Street Addre | 255 | | City | | State | Zip |
| Phone | | | Email | | | |
| Study Abroa | d Drogram in Call 2 0 | 25 : Berlin, German | / Vienne A | uctria | | |
| Study Abroa | u Program in Fail 20 | 23 Berlin, German | y vienna, Au | ISUIA | | |
| Academic W | /ork | | | | | |
| USC Cumula | tive GPA: | GPA | in USC German C | ourses: | | |
| | | e or related subjects) al | | | | |
| Course # | Title | | sem/yr taken | Units | Instructor | Grade |
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| List courses | in German (languag | e or related subjects) in | which you are cur | rently e | nrolled: | |
| Course # | Title | | sem/yr taken | Units | Instructor | Grade |
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Your signature below certifies that all the information provided by you in your application is correct and gives permission to the USC Dornsife Admission and Student Success Office to verify your academic and financial aid status for the purpose of determining your eligibility for this award.

Date: _____

Submit your completed application via email to USC Dornsife Admission and Student Success at <u>scholarships@dornsife.usc.edu</u> by <u>Monday, March 24th, 2025</u>