

Application Form—For SUMMER, 2020

The Alwine & Jesse Doyle European Language Study Abroad Scholarships Department of Languages & Literatures of Europe & the Americas University of Hawai‘i at Mānoa

The Alwine & Jesse Doyle European Language Study Abroad Scholarships support University of Hawai‘i at Mānoa students who want to earn six or more credits in one of the languages taught in the Department of Languages & Literatures of Europe & the Americas (French, German, Ancient Greek, Hebrew, Italian, Latin, Portuguese, Russian, and Spanish) at an accredited university in Europe. Students who propose to study at a European university where no UHM program exists should meet with the division chair for that language before applying. Preference will be given to students studying at the 200 level or above. Preference for graduate awards will be given to LLEA students.

Recent awards have varied from \$750 to \$1500.

Eligibility

- Applicant must have a 3.0 GPA in the language to be studied
- Applicant must have an overall 3.0 GPA
- Applicant must be a full-time undergraduate or classified graduate student in good standing

Application Procedure

Submit an application packet comprised of the following (and in this order) as a single pdf.

- this completed application form
- a 250-500 word essay describing:
 1. why you deserve the travel grant
 2. how these funds will help you accomplish your academic goals
 3. your financial need and how you will supplement this grant with other funding to finance your trip
- copy of transcript from STAR

Name a single pdf file accordingly: **Summer2020DOYLE_LastName.pdf** and E-mail it to LLEA464@hawaii.edu

Additionally, applicant must request two letters of recommendation from faculty who teach at UH Mānoa. Faculty must send the letters directly to the Doyle Selection Committee at LLEA464@hawaii.edu

The application deadline for **Summer 2020 semester abroad** is **Friday, Feb. 14, 2020**. *Incomplete or late applications will not be considered. *This includes late or missing letters of recommendation.

Applicant Name (as it appears in UH STAR system):

Last _____ First _____ M.I _____

8-digit UH ID # _____ Doyle Scholarship Amount Requested \$ _____

Program you want to attend: University of _____; Country _____

UH E-mail: _____@[hawaii.edu](mailto:_____@hawaii.edu) Overall GPA: _____ Language GPA: _____

Your declared major _____ Declared certificate or minor (if any) _____

Class standing: _____ Graduate (circle one): MA PhD Field of study _____