



University of Colorado
Denver

Risk Management and Insurance (RMI) Program

Business School

Fall 2017 RMI Scholarship Application Form

Student ID#: _____ E-Mail Address: _____

Name: _____ Birthdate: _____
(Last) (First) (Middle)

Mailing Address: _____

(City) (State) (Zip code)

Phone: _____ GPA _____

Risk Management and Insurance courses registered for (please circle all that apply):

RISK 3809 / RISK 4609 / RISK 4809 / RISK 4909 / RISK 4950 / RISK 6800 / RISK 6909

- Degree(s) pursuing at UC-Denver: _____
- I have declared an RMI specialization Yes No Which one? Undergraduate Graduate Minor Certificate
- I am a member of Gamma Iota Sigma (GIS) Yes No
- List of RMI Program, GIS and industry activities I have participated in to be considered for larger scholarships (attach an extra sheet if needed):
 CPCU (third Tuesday) PRIMA (third Thursday) RIMS (fourth Thursday) CSIA (second Tuesday)

- Attach current resume
- Expected graduation date for degree listed above: _____ Semester: _____ Year: _____

CERTIFICATION

I certify that all the information on this application and all supplementary forms are true and complete. I have read and understand the instructions. I agree to cooperate with additional requests for information. I agree to notify the RMI Program in writing of any/all changes to the information I provided on this form.

I understand that my tuition and fee payment, and late charges if assessed, are my responsibility even if I do not receive a scholarship. I agree to pay my tuition and fees in full, whether or not I receive any scholarship.

I hereby release my academic records to the RMI Scholarship Selection Committee.

If I receive a scholarship, I grant permission to the RMI Scholarship Selection Committee to release my name and email address to the company, chosen by the RMI Scholarship Selection Committee, which provides my ensuing scholarship.

If I receive a named scholarship, I agree to follow scholarship recipient protocol, which includes personally meeting with an executive from that company and writing a note of gratitude to the chosen sponsoring company.

DATE _____ SIGNATURE _____

WARNING: Any person who knowingly makes a false statement or misrepresentation on this form (or related documents) shall be subject to a fine of not more than \$10,000 or to imprisonment of not more than 5 years, or both, under the United States Criminal Code.

I certify that I have read the eligibility requirements for this scholarship and am eligible to apply. _____ (Initial)

Applications are due by August 25, 2017. Please return completed form to lori.genuchi@ucdenver.edu or mail to UC Denver, RMI Program, Campus Box 165, P.O. Box 173364, Denver, CO, 80217-3364