

**College of Agriculture, Forestry and Natural Resource Management (CAFNRM)**  
**ACHIEVEMENT GRANT**

**PURPOSE:**

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Achievement Grants will be awarded to CAFNRM students primarily on the basis of academic achievement. Additional criteria may include financial need and service contributions.

**AWARD:**

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The Achievement Grant is for one semester.

**INCOMING FRESHMAN and TRANSFER STUDENT:**

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Applicant will be awarded primarily on a scholarly achievement basis. Financial need and service contributions resulting in an overall impressive record may strengthen an application.

**CONTINUING CAFNRM STUDENT:**

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Applicant must be a full-time CAFNRM student with a one year academic track record at CAFNRM. Achievement Grants will be awarded primarily on a scholarly achievement basis. Financial need and service contributions resulting in an overall impressive record may strengthen an application.

**APPLICATION PROCEDURE:**

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1. Obtain application from CAFNRM Office or download from the CAFNRM web site at [www.uhh.hawaii.edu/academics/cafnm/](http://www.uhh.hawaii.edu/academics/cafnm/) under "Student Opportunities".
2. Submit completed application **by MAY 16, 2008** to Dr. Michael Tanabe, Chair of CAFNRM Scholarship Committee.

NOTE: Incomplete applications will not be considered in the primary pool (i.e., no submission of the list of courses taken and grades received)

**APPLICATION REVIEW and SELECTION OF AWARDEES:**

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The CAFNRM Scholarship Committee will review all applications and make recommendations to the Dean of CAFNRM. The Dean will notify successful applicants by July 1, 2008. The Dean's decision will be final.

**College of Agriculture, Forestry and Natural Resource Management (CAFNRM)**  
**ACHIEVEMENT GRANT APPLICATION**

SUBMIT COMPLETED APPLICATION to DR. MICHAEL TANABE by MAY 16, 2008  
CHECK when COMPLETED:  5-PART APPLICATION FORM     CAFNRM COURSE/GRADE LISTING

**PART I. GENERAL INFORMATION**

NAME:

STUDENT ID NUMBER:

CLASS STANDING:

MAJOR(s)/CAFNRM SPECIALIZATION(s):

ADVISOR:

CURRENT ADDRESS:

TELEPHONE NUMBER:

RESIDENCY STATUS:

IN-STATE RESIDENT     NON-RESIDENT     WUE

E-MAIL ADDRESS:

**PART II. ACADEMIC INFORMATION**

CUMULATIVE GPA:

NUMBER of CREDIT HOURS TAKEN  
DURING THE PAST ACADEMIC YEAR:

HOW MANY CAFNRM TUITION  
WAIVERS/ACHIEVEMENT GRANTS  
RECEIVED IN THE PAST?

ATTACH A LIST OF COURSES AND GRADES RECEIVED FOR EACH SEMESTER WHILE A STUDENT OF CAFNRM.

**PART III. FINANCIAL STATUS**

DO YOU RECEIVE FINANCIAL ASSISTANCE THROUGH FINANCIAL AID?

YES

NO

IF YES, LIST WHAT TYPE(S) OF FUNDING YOU RECEIVE: *(i.e., Pell Grant, GSL, Workstudy)*

LIST WHAT TYPE(S) OF ADDITIONAL FINANCIAL ASSISTANCE HAVE OR WILL YOU RECEIVE AND AMOUNT OF AWARD(S):

WILL YOU BE EMPLOYED DURING THE NEXT ACADEMIC YEAR?

YES

NO

NOT SURE

IF YOU BELIEVE YOU HAVE A STRONG FINANCIAL NEED, PLEASE ATTACH EXPLANATION TO THIS FORM.

**PART IV. EXTRACURRICULAR ACTIVITIES**

LIST SCHOOL RELATED ACTIVITIES COMPLETED WHILE A STUDENT AT UHH:

LIST SCHOOL RELATED ACTIVITIES YOU ARE PRESENTLY ENGAGED IN WHILE A STUDENT AT UHH:

LIST COMMUNITY SERVICE ACTIVITIES COMPLETED/PRESENTLY ENGAGED IN WHILE A STUDENT AT UHH:

**PART V. NARRATIVE**

PLEASE EXPLAIN WHY YOU DESERVE AN ACHIEVEMENT GRANT *(may include an attachment if additional space is needed)*.