



Illinois Professional Science Master's

Scholarship Application

Email to: PSMdegree@illinois.edu by March 1, 11:59 pm CST

First (Given) Name: _____

Last (Family) Name: _____

Illinois PSM Program Major Applied for: _____

Application Submission Date: _____

Cumulative GPA: _____

TOEFL/IELTS Score (if applicable): _____

Scholarship Questions

1. What are your goals during and after the Illinois PSM program?

2. What are two companies/organizations you would consider interning with next summer and why?
