

PRIVACY ACT ADVISORY STATEMENT

The Privacy Act of 1974 (P.L. 93-579) requires that you be given certain information in connection with this request for information. Accordingly, pursuant to the requirements for this act, please be advised:

1. Furnishing the information requested is voluntary.
2. The data will be used for selection of the Fort Valley State University (FVSU) 1890 Scholarship Program, printing certificates and related activities.
3. The data is maintained in a privacy act system as defined by the National Archives and Records Administration under the Office of Management and Budget.
4. Failure to complete this form will mean you cannot be included among those candidates being considered for designation as an FVSU 1890 Scholarship Program recipient.

I, _____, understand that I am a candidate for the FVSU 1890 Scholarship Program, have read the Privacy Act Advisory Statement and affirm my wish to be considered. In the event I am selected as a scholarship recipient, permission is hereby given for the release of materials submitted by me for the use of the U.S. Department of Agriculture (USDA) and the 1890 Land-Grant Universities as deemed appropriate for purposes of the FVSU 1890 Scholarship Program.

I further consent to the release of photographs that may be taken of me by or for FVSU and the USDA. I am (check one) willing unwilling to appear on radio and/or television if such arrangements are made by FVSU and the USDA.

Print Name: _____

Signature: _____

Date: _____

Note: Original signatures only. Photocopies will not be accepted.

Biographical Information

Legal Name

Last Name _____ First Name _____ M.I. _____

Sex: Male Female

Permanent Address _____

City _____ State _____ Zip Code _____

U.S. Citizen Yes No

Phone (Home) _____ (Cell) _____

Email Address _____