THE GRADUATE SCHOOL

Graduate Opportunity Program (GOP)/
Economically Disadvantaged First Professional Study (EDPS) Application

BINGHAMTON UNIVERSITY
STATE UNIVERSITY OF NEW YORK

The Graduate School
Binghamton University
PO Box 6000
Binghamton, NY 13902-6000
607-777-2151; Fax: 607-777-2501
binghamton.edu/grad-school

If you are a former EOP, HEOP or SEEK Program participant, you are eligible to apply for a partial tuition scholarship through the Graduate Opportunity Program (GOP). If you are also a PharmD student, you are also eligible to apply through the Economically Disadvantaged First Professional Study (EDPS). Both programs are SUNY Opportunity Programs.

Please attach a personal statement describing your reasons for pursuing graduate study, your career aspirations, your special interests within your field and any unusual features of your background that might need explanation or be of interest to the review committee.

You must file a Free Application for Federal Student Aid (FAFSA) with the Office of Financial Aid and Student Records by the appropriate deadline and submit this GOP/EDPS application and your personal statement to the Graduate School at gsfin@binghamton.edu by June 30 each year to be considered for funding for the following academic year.

Name: _____ B-Number: _____
Last First Middle Initial

E-mail Address: _____ Phone Number: _____

Did you participate in the EOP, HEOP or SEEK Program as an undergraduate student? Yes ◯ No ◯

Undergraduate Institution: _____

(If you did not attend Binghamton University, please attach proof of EOP, HEOP or SEEK participation.)

Graduate Degree Program: _____ Graduate Degree:

Entry Term (Semester and Year): _____ Graduation Term (Semester and Year): _____

Race/Ethnicity:* Hispanic/Latino/a:*

*This information is requested for recruitment and statistical purposes only. The State University of New York grants admission and financial aid based on the qualifications of the applicant, without regard to sex, race, age, color, creed, national origin, disability or handicap.

By signing below, I am acknowledging that I understand that these competitive awards are based on financial need and tuition scholarship eligibility, as well as graduate degree program enrollment status, previous academic performance at the undergraduate and graduate levels and, if applicable, test scores. I am also acknowledging that I understand that, if I am selected to receive an award, I must accept and comply with all terms and conditions detailed on the "Terms and Conditions for Acceptance of a Tuition Scholarship" form.

Signature: _____ Date: _____