

Actuarial Exam Reimbursement Application

Please fill out information below and submit to Dr. Paris, with a copy of your receipt and confirmation of passing.

Name: _____ EMPLID: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____

Exam(s) Passed: _____

Reimbursement Amount: _____

If you answer "Yes" to all of the following questions, please write a Thank You Letter addressed to the Evelyn and John Baugh Scholarship Committee and turn it in with your paperwork.

Are you a U.S. Citizen? _____

Are you a Department of Mathematics student, in a degree program within the department? _____

Are you enrolled in **at least** 6 hours of the current semester? _____

Are you taking Undergraduate classes next semester? _____

Approved by Stephen Paris: _____