

IDEA Graduate Scholarship Program Admission Form

20 years of experience with over 15,000 students

Program cost U\$S 2,500



PERSONAL INFORMATION

Full Name: _____ Date of Birth ___ / ___ / ___

Address: _____

Country and City: _____ Zip code: _____ Phone: _____

e-mail: _____ Additional email or phone: _____

EDUCATION BACKGROUND

High School: _____ Class of: _____ GPA (4.0 scale) _____

University: _____ Degree: _____ GPA (4.0 scale) _____

Degree Complete: Yes ___ No (hrs completed) _____ TOEFL: _____ SAT: _____ GRE: _____ GMAT: _____

FUTURE EDUCATION

Fields of study or graduate program of interest

Do you have a specific University in mind?

Start date: Fall Term (August) 20 ___ Spring Term (January) 20 ___

Please briefly describe your personal Goals:

How did you learn about IDEA? Referred by whom?

INTERNATIONAL DOORWAY TO EDUCATION & ATHLETICS CORP.

1111 Brickell Ave 11th floor, Miami, FL 33131, U.S.A

Tel: (305) 913-7122 - Fax: (305) 946-7711

www.internationaldoorway.org - info@internationaldoorway.org