



VENTURES SCHOLARS PROGRAM MEMBER INSTITUTION CHECKLIST

Name of College/University: _____

Contact Name: _____

Phone Number: _____

Factor	Appropriate	Not Appropriate	Additional Comments
1. Size of School			
2. Location			
3. Ethnicity			
4. Coed or Single-Sex			
5. Private or Public			
6. Extracurricular Activities			
7. Academic Programs			
8. Career Planning			
9. Financial Aid			
10. Research Opportunities			
11. Internships & Coops			
12. Graduate School			