

Aspire. Achieve. Become.

## **SCHOLARSHIP APPLICATION**

2016-2017 Academic Year

STUDENT INFORMATION

First Name:

Return application and required documents by June 1, 2016 to:
Maria College Office of Financial Aid
700 New Scotland Avenue / Albany, NY 12208
Questions: (518) 861-2586

Last Name:

Birth Date:	Social Security Number:	Home Phone	Number:	Cell Phone Number:			
/ /		( )		( )			
Street Address:							
City:	S	State: ZIP Code:					
E-Mail Address:							
Maria College annually awards a limited number of scholarships. All awards will be based on financial need and academic achievement. All awards are limited by available funds. To be considered for a scholarship for the 2016-2017 academic year, this application form must be submitted by June 1, 2016. Please note that the review and initial awarding of scholarships will begin on May 1, 2016. Late applications will not be accepted and incomplete applications will not be reviewed or considered. Priority is given to full-time students.  You must attach a written explanation why you should be considered a candidate for each scholarship and explain how you meet the criteria for that scholarship. Please indicate which scholarship(s) you are applying for. Requirements and additional details about each scholarship can be found at <a href="https://www.mariacollege.edu">www.mariacollege.edu</a> .							
I AM APPLYING FOR THE FOLLOWING SCHOLARSHIPS:							
<ul> <li>Allied Health Sch</li> <li>Caron Family Scholarsh</li> <li>Mary K. Knapek</li> <li>Judith Ann Maro</li> <li>Timothy McDona</li> </ul>	holarship ip Scholarship tta Scholarship	<ul> <li>□ Presidential Scholarship</li> <li>□ Jean A. Schmitz Scholarship</li> <li>□ Shapiro/Lynch Scholarship</li> <li>□ Thorne Nursing Scholarsh</li> <li>□ Laureen A. Fitzgerald Sch</li> <li>□ Bishop Hubbard Scholarsh</li> </ul>		tz Scholarship Scholarship g Scholarship zgerald Scholarshi			
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PLEASE SIGN / DATE							
udent's Signature		Date					