

NAME OF SCHOLARSHIP:

Alumni Association Scholarship

HOW ESTABLISHED:

Established during the Capitol Campaign of 1986 with an initial pledge of \$5,000 in August 1987. Awards will be made annually; not to exceed \$500 per person. Principle is to remain intact.

STIPULATIONS:

Eligible candidates will be the child or grandchild of a Rio Grande graduate, and will be enrolled as a full-time student at the University. Candidates must be of Junior or Senior status, on the college level. Recipients will be selected based on merit and/or need as determined by the Awards & Recognition Committee of the University of Rio Grande Alumni Association.

HOW TO APPLY:

Office of Financial Aid

Office of Alumni Relations (Berry Center)

*Deadline to apply is February 1 of each year.

CONTACT & ADDRESS:

Delyssa Edwards
Director of Alumni Relations
University of Rio Grande
PO Box 500
Rio Grande, OH 45674



URG ALUMNI ASSOCIATION SCHOLARSHIP
APPLICATION

ELIGIBILITY REQUIREMENTS:

- Candidate must be a child or grandchild of a Rio Grande graduate
- Candidate must be enrolled as a full-time student
- Candidates must be a Rio Grande junior or senior (Underclassman and high school students cannot apply until they reach junior or senior status at Rio.)
- Candidates must be enrolled in a four-year program, or in their second year of a two-year program

NAME: _____ STUDENT ID: _____

MAILING ADDRESS: _____ COUNTY: _____

MAJOR: _____ GPA: _____

TYPE OF PROGRAM: 4 YEAR PROGRAM 2 YEAR PROGRAM

TYPE OF DEGREE: ASSOCIATE BACHELOR

COLLEGE YEAR STATUS: JUNIOR SENIOR

ARE YOU A CHILD OR GRANDCHILD OF A RIO GRANDE GRADUATE?

CHILD GRANDCHILD

LIST THE NAME(S), RELATION TO EACH, AND YEAR THEY GRADUATED:

CAMPUS INVOLVEMENT:

WHAT IS YOUR FUTURE AMBITION?

LIST ALL FINANCIAL AID YOU ARE CURRENTLY RECEIVING:

I hereby state that all of the above information is correct to the best of my knowledge. I hereby understand that if any information I have provided is false, any scholarships that have been obtained from my misinformation will be removed.

STUDENT SIGNATURE: _____ **DATE:** _____

DEADLINE IS FEBRUARY 1. Once completed, please mail to:
URG OFFICE OF ALUMNI RELATIONS, PO BOX 500 RIO GRANDE, OH 45674