

Marymount University Alumni Scholarship Application

Eligibility:

Any full-time undergraduate student who is a graduate of any Marymount school (elementary, junior, or senior high school) or who are sons or daughters of graduates of Marymount schools or colleges.

Value of Scholarship:

For Resident students: \$800 per academic year
For Commuting students: \$500 per academic year

Student Information:

Name of applicant: Mr. [] Mrs. [] Ms. [] _____
Permanent address _____
Telephone # _____ Social Security # _____

Check item #1 or #2; then complete the appropriate blanks:

1. _____ I am a graduate of a Marymount school. (Enrolling student completes)
Name of school: _____
Location: _____
Year of graduation: _____
2. _____ I am a son/daughter of a graduate of a Marymount school, college or university.
Name of graduated parent: _____
Name used if different from above: _____
Degree obtained (if applicable): _____
Name and location of school: _____

Signatures:

Student's signature _____ Date _____
Graduated Parent's signature _____ Date _____

Please submit a copy of your diploma or other documentation which verifies your graduation or your parent's graduation from the school listed above.

Return form to: Marymount University
Office of Financial Aid
2807 North Glebe Rd.
Arlington, VA 22207-4299