## **ALUMNI GRANT APPLICATION**

Saint Vincent College is proud to provide an opportunity for alumni to recommend prospective students for the Alumni Grant of \$4,000 (\$1,000 per year for four years), which will be awarded upon the student's acceptance for admission and applied toward tuition, upon matriculation to Saint Vincent.

- Must be applying for full-time undergraduate study at Saint Vincent College.
- May not be currently enrolled at Saint Vincent College. (Note: If this scholarship is not requested prior to enrolling as a new freshman, subsequent application is not permitted.)
- Completed application must be received by May 1. It can be included with the application for admission or sent separately.

## Part I: Student Applicant (please print)

Student's Name			
Address			
Номе Рнопе	Cell Phone	Email	
High School or College/University		Сіту	State
	Part II: Alumna/Alu	umnus (please print)	
Name			
Address			
Home Phone	CELL PHONE	Email	
CLASS YEAR(S)	Degree(s)	Majors(s)	
Occupation/Employer			
RELATIONSHIP TO STUDENT*: O RELA * Saint Vincent College employees may n		TOR O PRIEST/MINISTER O ADMISSI	on Referral
As a courtesy, the Saint Vincent Colle	ge Admission Office will not	ify the Alumna/Alumnus of your Alum	ni Grant Application.

## **Part III: Application Response**

In one paragraph (approximately 100 words), write what you have learned from the following question that you have asked a Saint Vincent College alumna/us: **Based on your experience**, what are the benefits of attending Saint Vincent College?

You can use the reverse side of the Application, or provide a separate page (If submitting a separate page PLEASE INCLUDE your name, email address and cell phone number, as well as the name and email address and/or phone number of the alumna or alumnus).

Please return completed application to:

Office of Admission Saint Vincent College 300 Fraser Purchase Road Latrobe, PA 15650 Fax: 724-805-2507 admission@stvincent.edu

