

SCE SCHOLARSHIP COMMON APPLICATION FORM

AN APPLICATION MUST BE COMPLETED EVERY TERM FOR WHICH YOU WISH TO BE CONSIDERED FOR FUNDING. YOU DO NOT NEED TO SUBMIT ADDITIONAL COPIES OF IRS TAX RETURNS OR ESSAYS EACH SEMESTER UNLESS ANY INFORMATION HAS CHANGED OR NEEDS TO BE UPDATED.

PLEASE NOTE: DEADLINE FOR APPLICATIONS FOR FALL is AUGUST 11, WINTER/SPRING JANUARY 1, and SUMMER- MAY 1.

DATE: _____ TERM: _____
NAME: _____
BANNER ID : _____

ADDRESS: _____
TELEPHONE NUMBERS: Cell: _____ Work: _____ Home: _____
EMAIL ADDRESS: _____

DEGREE STATUS: _____
CITIZENSHIP STATUS: _____ U.S. citizen
_____ Permanent Resident _____ Visa (indicate type) _____

I am applying for the following SCE scholarships: (mark all that apply)

_____ Eleanor A. Casserly Memorial Scholarship Fund
AVAILABLE FALL AND SPRING

_____ Rev. John Cunningham Diversity Scholarship
AVAILABLE FALL, SPRING, AND SUMMER

_____ Rev. Michael Murphy Scholarship
AVAILABLE FALL, SPRING, AND SUMMER

_____ SCE Women's Scholarship
AVAILABLE FALL AND SPRING

_____ Dr. Edwin K. Gora Award
AWARDED ONCE EACH YEAR

I have filed a FAFSA for the _____ academic year ___Y ___N

I have enclosed a copy of my _____ (year) tax return filing _____ Y _____ N
(year)

OR My current tax return information is on file in the SCE _____ Y _____ N

If you have not filed an annual tax return, please submit a brief explanation regarding the circumstances.

My application essay is enclosed. _____ Y _____ N

Number of courses I plan to register for in _____ (fall, winter/spring, summer) semester:

My current overall g.p.a. is _____

I have completed a total of _____ credits in Providence College's School of Continuing Education as of _____ (date).

I have transferred in a total of _____ credits to the SCE as of _____ (date).

I work _____ hours per week.

Is that considered full time by your employer? _____ Y _____ N

What other types of financial assistance are you currently receiving? (e.g. employer reimbursement, local scholarships, family support, etc.) Please indicate the percentage of tuition assistance you are currently receiving. _____

I attest that the information included in this application is accurate and correct to the best of my knowledge.

Student Signature: _____

Date: _____