



RENAISSANCE SCHOLAR APPLICATION FORM

TO BE CONSIDERED FOR THE RENAISSANCE SCHOLAR PROGRAM, PLEASE PROVIDE THE FOLLOWING INFORMATION AND CHECK THE "I AGREE" BOX ON THE SECOND PAGE OF THE APPLICATION FORM.

PERSONAL INFORMATION:

NAME: _____

STREET ADDRESS: _____

CITY; _____ STATE; _____ ZIP; _____

SOCIAL SECURITY #: _____

DATE OF BIRTH _____

PHONE NUMBER HOME: _____ CELL: _____

E-MAIL ADDRESS: _____

EMPLOYER: _____ FT OR PT (IF PT, HOURS/WEEK) _____
(NEED COPY OF PAY STUB)

ELIGIBLE FOR PUBLIC ASSISTANCE: YES NO RECEIVING PUBLIC ASSISTANCE: YES NO

IF YES, LIST ALL ASSISTANCE YOU ARE RECEIVING _____

LIST DEPENDENTS LIVING WITH YOU (INCLUDE AGES AND RELATIONSHIP TO APPLICANT):

_____	_____	_____
_____	_____	_____
_____	_____	_____

ACADEMIC INFORMATION:

HAVE YOU APPLIED TO MARIA COLLEGE: YES NO

APPLICATION DATE: _____

PROGRAM OF STUDY: _____ START DATE: _____

SCHOOL YOU EARNED HS DIPLOMA OR GED

NAME OF PRIOR COLLEGE; DEGREE(s) – ASSOCIATES/BACHELORS, OR NUMBER OF COLLEGE CREDITS:

CITY: _____ STATE: _____

CUMMULATIVE GPA OF PRIOR COLLEGE CREDITS: _____

(NEED (UNOFFICIAL) COPY OF TRANSCRIPTS)

COMPLETED FAFSA: YES NO



RENAISSANCE SCHOLARSHIPS ARE AVAILABLE FOR STUDENTS WHO ARE/WILL BE:

- ENROLLED IN A MARIA COLLEGE DEGREE PROGRAM IN NURSING OR A RELATED HEALTH CARE TRACK;
- RESIDENTS OF ALBANY COUNTY;
- ELIGIBLE FOR COUNTY DEPARTMENT OF SOCIAL SERVICES PUBLIC ASSISTANCE;
- ELIGIBLE FOR ACADEMIC FINANCIAL AID; AND
- MAINTAINING SATISFACTORY ACADEMIC PERFORMANCE;

PLEASE NOTE THAT, IN MOST CASES ALL OF THE ABOVE CRITERIA MUST BE MET. HOWEVER, EXCEPTIONS MAY BE CONSIDERED UNDER CERTAIN CIRCUMSTANCES.

ONCE AN APPLICANT IS ACCEPTED, THERE WILL BE A RELEASE FORM FROM MARIA COLLEGE AND A LETTER OF ACCEPTANCE THAT WILL BE REQUIRED TO BE SIGNED.

SCHOLARSHIP DISBURSEMENTS WILL BE MADE DIRECTLY TO MARIA COLLEGE

I HAVE READ AND AGREE THAT THE INFORMATION PROVIDED IS ACCURATE.

SIGNATURE OF APPLICANT _____

DATE _____