



ALUMNI ASSOCIATION GRADUATE SCHOLARSHIP APPLICATION FOR 2019-2020

The UMass Dartmouth Alumni Association is committed to providing scholarships to help current students be successful during their time at UMass Dartmouth. For the 2018-2019 academic year, the Alumni Association awarded more than \$35,000 in scholarships to students.

All eligible students must complete and submit this application in order to be considered. Completed applications will be reviewed, and winners selected, by the UMass Dartmouth Alumni Association.

You must meet all of the below criteria to be considered for this award:

- **Currently a full-time graduate student**
- **Minimum cumulative GPA of 3.0**
- **Planning to be enrolled full-time at UMass Dartmouth (9+ day credits per semester) during the 2019-20 academic year**
- **Demonstrate Financial Need by completing the 2019-20 FAFSA prior to March 1, 2019**

A copy of your most recent transcript (official or unofficial) from the Registrar's Office must accompany the application. Including a one page resume is suggested. Your original signature is required on the application. If sent via email, please come to the Financial Aid Office to sign your application.

Completed applications must be received by 5:00 pm on March 1, 2019 in the Financial Aid Office.

It is your responsibility to ensure that your completed application is received on time. The application will not be considered if all materials, including transcripts, are not received by the deadline. Part-time, international, and doctoral students are not eligible to apply for this scholarship. Scholarship winners will be notified by letter. Disbursements will be split evenly between your fall 2019 and spring 2020 semester accounts.

You may submit your completed application in person to the Financial Aid Office or email it to financialaid@umassd.edu. If you have any questions, please call the Financial Aid Office at 508.999.8643.

Return application to:

**Financial Aid Services
Foster Administration Building, Room 105
285 Old Westport Road
North Dartmouth, MA 02747-2300**



UMass

Dartmouth
ALUMNI

ALUMNI ASSOCIATION GRADUATE SCHOLARSHIP APPLICATION FOR 2019-2020

Name: _____

Student ID Number: _____ Date of Birth: _____

Home Address: _____

Email Address: _____ Telephone: _____

Anticipated Graduation (Month and Year): _____

Name and relationship of family members who are current students or alumni of UMass Dartmouth or a predecessor institution: _____

Name(s) and age(s) of dependent(s) siblings or children living at home: _____

List UMass Dartmouth activities, sports and clubs you participate in: _____

List community activities, honors and volunteerism you participate in or have been awarded: _____

List past job experience or current employment (or attach your resume) _____

How are you funding your education? _____

What is your career goal? _____

On a separate sheet of paper please answer the following question in a **200 word essay**:

Why should you be considered for the UMass Dartmouth Alumni Association Scholarship?



UMass

| Dartmouth
ALUMNI

ALUMNI ASSOCIATION GRADUATE SCHOLARSHIP APPLICATION FOR 2019-2020

Under penalties of perjury, I declare that the above statements are to the best of my knowledge and belief to be true, correct, and complete. Your signature below indicates permission to have the completed scholarship application form, transcript, essay, as well as your UMass Dartmouth financial aid information reviewed by the scholarship committee. You also give permission to release such information to the donors, should you be selected as a recipient.

Signature: _____ Date: _____