



Legacy Scholarship Application

Designed as a way to give back to the Montclair State University family and to demonstrate appreciation to alumni who contribute to the growth and enrichment of MSU, the Legacy Scholarship provides an opportunity for tuition assistance to the children or grandchildren of alumni. Entering, full-time freshmen are eligible to apply for this scholarship.

The Alumni Legacy Scholarship will be awarded on the basis of academic achievement, as determined by the Office of Undergraduate Admissions, and financial need, as determined by the Office of Student Financial Aid. Interested students must file the Free Application for Federal Student Aid (FAFSA), indicating MSU as one of the recipients. FAFSA applications will be available January 1, 2010 at www.fafsa.ed.gov.

A completed application form and the accompanying 200 word essay must be received by the Office of Alumni Relations by **Monday, April 12, 2010**.

1. Personal Information – All information will be kept confidential

Last FOUR digits only of Social Security Number: _____ Date of Birth: _____

Full Name (First, MI, Last): _____

Mailing Address: _____

Home Phone: _____ Email: _____

Prospective MSU Major or Course of Study: _____

Name and Location of the High School you are currently attending: _____

2. Alumni Information – Please provide the name of Parent(s) or Grandparent(s) who are alumnus/alumni of Montclair State University. Please include maiden names and graduation years.

Full Name (First, MI/Maiden, Last): _____ Year(s): _____

Full Name (First, MI/Maiden, Last): _____ Year(s): _____

Full Name (First, MI/Maiden, Last): _____ Year(s): _____

3. Extracurricular Activities – On a separate sheet of paper, please list your Student Involvement, Leadership, Volunteer Work, Community Service, etc. A resume is not necessary, but acceptable.

4. Essay – On a separate sheet of paper, write an essay in 200 words or fewer telling us what you will bring to MSU as an undergraduate student, as well as your career and educational goals.

5. Affirmation

I hereby affirm that to the best of my knowledge the information supplied in this application is complete and accurate. If selected as a recipient, I agree to permit the Alumni Association to interview me and publicize the award.

Signature: _____

Date: _____

For more information, please contact the Office of Alumni Relations:

Phone Number: (973) 655-4141

Email Address: alumni@mail.montclair.edu

All application materials can be returned to:

Mailing Address:

Montclair State University Alumni Association
Attn: Legacy Scholarship Committee
c/o Office of Alumni Relations
1 Normal Avenue – College Hall 301
Montclair, NJ 07043

Fax Number: (973) 655-5483

Note: All MSUAA Scholarships and Awards may be applied to tuition and fees only. Any *other* tuition assistance will be applied to the student's account and may decrease the amount of the scholarship awarded by the MSUAA.

Scholarships are administered in conjunction with the Office of Financial Aid and the Student Accounting Office of Montclair State University.

The Montclair State University Alumni Association supports the Affirmative Action/Equal Opportunity policy of the University. These awards are made to students based on merit, regardless of sex, gender, race, color, religion, sexual orientation, age or national origin.