

ALUMNI SCHOLARSHIP APPLICATION

Please print legibly. Please answer all questions.

To apply, please fill out the application and send it in along with the following documents:

 Respond to the following question with a 500 word essay: How will you contribute to the AUR community and school spirit? Please provide specific examples. Parent or Sponsor's official governmental financial statement Examples: FAFSA or Income Tax Form-US citizens CUD-Italian citizens P60-UK citizens 	
PERSONAL INFORMATION	
Name	
Country of citizenship	Male 🗆 Female 🗆
Birth date (mm/dd/yyyy)//	
Date of entry at AUR (mm/dd/yyyy)//	
Major	
CONTACT DETAILS	
Mailing address	
CityState/	Province
Postal CodeCountry	
Home phoneMobile	
Email address	

FINANCIAL INFORMATION

Are you receiving scholarship support from other sources? Yes □ No □ If yes, please give details of source and amount you expect to receive:

Source:

Amount: _____

Would you consider loans? (For US citizens or eligible non-citizens) Yes □ No □ Would you consider student assistantships? (For returning students only) Yes □ No □

READ, SIGN, AND DATE BELOW

The University has a limited number of scholarships, which include student assistantships and AUR scholarships. Funds awarded must be applied to tuition expenses. Assistance is awarded for no less than one semester. The value of a single scholarship will not exceed the cost of tuition. The Alumni Scholarship is awarded for one year. Scholarships are awarded for the academic year and will be allocated in equal parts between the Fall and Spring semesters. Students must also maintain full time status.

New students are selected based on their academic credentials from high school or prior university including grades, financial need, standardized text scores, letters of recommendation and extracurricular activities. Incoming new students are not eligible for student assistantships during their first semester.

If you have any questions, please contact the Financial Aid Administrator. Please send or hand deliver your application along with all supporting documents to: By Mail: By Email: Financial Aid Administrator financialaid@aur.edu The American University of Rome Via Pietro Roselli, 4 00153 Rome, Italy

I have read and fully understand "The American University of Rome Scholarship Information". All of the information provided by me or any other person on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give further proof to the information I have given on this form. When financial need is claimed, I realize that I must provide additional supporting documentation. I also realize that if I do not provide AUR with proper documentation, the scholarship may be denied.

I understand that I may not receive a scholarship if I owe payment to prior tuition unless I have made satisfactory arrangements to repay.

SIGNATURE OF APPLICANT

DATE___/___/