

Graduate Scholarship Program

Graduate scholarships will be awarded for the semester (fall, spring, and summer) in the following amounts per semester:

- \$ 500 - \$ 1,500 based on GPA, demonstration of need and credit hours enrolled in

Eligibility

Programs:

- Master's Degree seeking students at the University of Saint Francis

Academic:

- Undergraduate GPA of 3.0 / 4.0
- Graduate GPA of 3.4 / 4.0
- Maintain a 3.0 Graduate GPA

Other:

- Must apply and be accepted into a graduate program
- Must file the Free Application for Federal Student Aid
- Demonstrate some degree of financial need
- Apply by July 1 for Fall, November 1 for Spring and April 1 for Summer
- Graduate scholarships will be awarded for one semester.
- Must register for at least 6 graduate credit hours
- Must re-apply for the graduate scholarship each semester

Application Procedures

- Obtain an application from the Graduate School or from the Graduate Studies website
- File the FAFSA
- Return the completed application to:

University of Saint Francis
Graduate School
2701 Spring Street
Fort Wayne, IN 46808

or e-mail to gradschool@sf.edu

Applicants will be notified of the decision by letter. If accepted for the graduate scholarship, the amount will be deducted from the student's bill.



Application for Graduate Scholarship

Name _____
First Name Middle Name Last Name

Permanent Address: _____
Street City State Zip Code

Telephone Number: (____) _____ USF ID# _____

List graduate program to be followed:

Yes	No	
___	___	I have filed an application for admission to the Graduate School
___	___	I have filed the FAFSA
___	___	I have been accepted to a specific Master's program
___	___	I have requested an official transcript of my bachelor's degree to be sent to the <u>Office of Admissions</u>

I plan to start (or have started) my graduate program: ___Fall ___Spring ___ Summer
Year: _____

I am applying for a scholarship for the following semester ___Fall ___Spring ___ Summer
Year: _____

Signature of Applicant Date

Complete the application and return to:

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Office use only:

EFC _____ GPA _____ Credit Hours Enrolled in _____
Accepted _____ Denied _____ Date _____ Semester/Year & Amount _____