

**Personal Data** 

Phone number

UC Class\*

Title

City

Parent's Employer

**Permanent Address** 

Parent's/legal guardian's name(s)

## 2014-2015 Undergraduate\* Legacy Scholarship Application

Please complete and return to: Utica College, Student Financial Services 1600 Burrstone Road, Utica, New York 13502

Fax: 315-792-3368 • Email: sfs@utica.edu

Social Security Number

**Social Security Number** 

Occupation

Mother's maiden name (if she is the alumna)

Zip Code

Applicant's name		Utica College ID Number	
I wish to begin full-time study	Fall 2014	Spring 2015	
Permanent Address			
City	State	Zip Code	

*Eligibility: In order to be considered for a Legacy Scholarship, one parent must be a Utica College
graduate. All applicants must complete a Free Application for Federal Student Aid (FAFSA). Scholarships
awarded are based on full-time main campus undergraduate enrollment.

State

<sup>\*</sup>The Legacy Scholarship is not available to undergraduate on-line students.