

## SCHOLARSHIP AWARD ACCEPTANCE FORM

Name \_\_\_

Social Security Number \_\_\_\_\_

## Award: Transfer Scholarships\*

\* partial tuition scholarship (see award letter) for Notre Dame of Maryland University awarded annually for up to six consecutive semesters (fall and spring) providing the student:

- earns a minimum of 12 graded credits each semester,
- maintains a 2.5 cumulative grade point average throughout her 2-3 years, and
- remains continuously enrolled at the University.

This scholarship applies to full time program of study in the Women's College and is non-transferable to specialized programs such as 3-2 dual-degree study or School of Pharmacy.

Please fill out this form and return to the University within three weeks of receipt of this letter. Due to the large number of qualified students, your timely response will allow the University to determine the number of scholarships available for the next round of awarding. Acceptance of the scholarship is not the same as formal deposit to the institution.

The University reserves the right to fund the institutional dollars awarded in this scholarship using various sources of funding. Changes to the source of funding can be made at the University's discretion based on the Financial Aid Awarding policies. Students will be notified of any changes.

I would like to accept this offer of scholarship as a member of the incoming class.

Student Signature

Date

Parent Signature

Date

*For office use only:* 

Scholarship acceptance date \_\_\_\_\_

Deposit date