



2017-2018 DIVERSITY GRANT APPLICATION

Name			Student ID #	
Street Address	City	State	Zip	Phone

Program:

- | | |
|--|--|
| <input type="checkbox"/> Education | <input type="checkbox"/> Social Work |
| <input type="checkbox"/> Business | <input type="checkbox"/> Science/Engineering |
| <input type="checkbox"/> Psychology | <input type="checkbox"/> Divinity |
| <input type="checkbox"/> Arts and Sciences | |

Enrollment Plans:

List the number of credits you plan to take each term.

Fall 2017: _____ Spring 2018: _____ Summer 2018: _____

Personal Statement:

Include with this application a personal statement indicating your reasons for requesting the Diversity Grant. Share your diverse socio-economic background as well as hardships and/or obstacles that you have overcome to succeed in higher education.

Eligibility Requirements:

1. You must be a U.S. Citizen or Eligible Non-Citizen.
2. You must complete and submit the 2017-2018 Free Application for Federal Student Aid (FAFSA) to the University of St. Thomas (school code 002345) and demonstrate financial need.
3. You must be admitted into an eligible program.
4. For priority consideration, your application must be received by the date listed that corresponds with the first semester you are enrolled in the 2017-2018 academic year.
 - **Fall Semester – August 1, 2017**
 - **Spring Semester – January 1, 2018**
 - **Summer Semester – April 1, 2018**

Signature (Original Signature Required)	Date
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University of St. Thomas
 Financial Aid Office, Mail 5007
 2115 Summit Avenue
 St. Paul, MN 55105
 Phone: (651) 962-6550 Fax: (651) 962-6599

Graduate Financial Aid Office
 Terrence Murphy Hall, Suite 251
 1000 LaSalle Avenue
 Minneapolis, MN 55403

For Financial Aid Use Only – A11000

Approved: _____ \$ _____

Denied: _____

Initials: _____ Date: _____