Dear Applicant:

The Crown and Lance Alumni Association established their Endowed Scholarship to provide financial assistance to children and grandchildren of its membership.

The award will be given annually and the candidates must apply for a renewal for each of their subsequent years at Hofstra. The amount each year will be determined by the availability of funds, the number of recipients and the discretion of the committee.

The scholarship will be awarded based on financial need and scholastic achievement and outstanding participation in extracurricular activities including community/school service.

If you have a child or grandchild who is currently attending Hofstra, or who is considering Hofstra, please take the time to have this application completed and submitted by Friday, April 4, 2003.

The Crown and Lance Alumni Association
Endowed Scholarship Committee
c/o Jim Cusack
Alumni House
150 Hofstra University
Hempstead, NY 11549-1500

Applications must be legible (preferably type-written) and fully completed in order to be considered. All applicants will be notified prior to April 18, 2003 of the committee’s decision.

If you have any questions, please contact Jim Cusack (RDZ), Director of Alumni Relations, at (516) 463-6636.

Cordially,

The C&LAA Scholarship Committee
CROWN AND LANCE ALUMNI ASSOCIATION ENDOWED SCHOLARSHIP

Information Authorization Form

To: Office of Financial Aid, Hofstra University  
   Office of Admissions, Hofstra University

From: ____________________________________________________  
       Print Full Name

SS # or HUID: _________________________________________

I authorize the Offices of Admissions and Financial Aid to release to the Crown and Lance Alumni Association Scholarship Committee (c/o the Alumni Relations Office) information on my academic records and my financial status, including college costs and other scholarships, grants, loans or discounts that will be awarded to me.

This information will be confidential.

________________________________     ______________________  
Applicant Signature                     Date

________________________________     ______________________  
Parent Signature                        Date
CROWN AND LANCE ALUMNI ASSOCIATION
ENDOWED SCHOLARSHIP APPLICATION
2003-2004 ACADEMIC YEAR

Name____________________________________Date of Birth________________
Address_______________________________________________________________________
Telephone____________________ S.S.# or HU ID______________________________

Family alumnus: __Father __Grandfather __Great Grandfather

Alumnus information

Name____________________________
Year of graduation__________________ Degree and Major_______________________
Occupation________________________ Employer______________________________

Current Hofstra Students - please complete items A through C
Transfer Students - please complete items A through E
New Students - please complete items F through I

A. Current Year in attendance (fr., soph., etc.)__________________________
B. GPA____________________
C. Major___________________
D. Name of current College/University____________________________________
E. Address of current College/University___________________________________
F. Name of High School________________________________________________
G. Class Rank_______out of______students. H. Grade Point Average______
I. SAT Scores: Verbal_________Math__________

Please list, with dates, your extra-curricular activities and/or special honors or awards you have
received during your high school/college career

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please list, with dates, your community service activities or activities you participated in outside of school

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please list, with dates, your employment experience

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please list any extra-curricular or athletic activities that you hope to participate in at Hofstra

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Please tell us the field of study that you are interested in pursuing on the college level

If you are an entering freshman, do you intend to work during your first year of college?
How many brothers and sisters do you have?
Are you the recipient of any other scholarships?
If yes, please name the scholarship(s) and the amount(s).

In one or two double-spaced, typewritten page(s), tell us why you feel you should be the recipient of this scholarship. Make sure your name is visible on the top of the page(s) and attach it/them to this application.  **Be sure to keep a copy of all information for your records.**

I am applying for this scholarship based on:

_____Financial Aid _____Overall Academic and Extra-curricular Performance  _____Both

_________________________  ______________________________
Student Signature          Parent Signature

_________________________  ______________________________
Date                      Date