

**HOFSTRA UNIVERSITY  
CROWN AND LANCE ALUMNI ASSOCIATION  
ENDOWED SCHOLARSHIP  
2023-2024**

Dear Applicant:

This scholarship will be awarded to one or more undergraduate students on the basis of academic achievement and social engagement. Preference will be given to descendants of Crown and Lance Alumni. In the event that an eligible student cannot be identified, the scholarship may be awarded to a student based on academic achievement and participation as a member of a fraternity at Hofstra. Preference will also be given to a student who works in the Hofstra University Office for Development and Alumni Affairs.



Please complete and submit this application via email **by 4pm on Friday, June 23, 2023 to:**

**Crown & Lance Alumni Association Endowed Scholarship Committee**  
Attn: Amy Reich, Executive Director for Alumni Affairs and Special Events  
alumni@hofstra.edu

All application items must be submitted together and be legible (preferably typewritten) and fully completed in order to be considered. **APPLICATIONS MUST INCLUDE A COPY OF YOUR CURRENT TRANSCRIPT (THIS SHOULD BE WEB, NOT OFFICAL, TRANSCRIPTS) OR DAR (DEGREE AUDIT**

**REPORT).**

The **FERPA Student Release consent form must be submitted along with this application.** This form can be downloaded from: [www.hofstra.edu/pdf/acadrec\\_FERPA.pdf](http://www.hofstra.edu/pdf/acadrec_FERPA.pdf). On this form, fill in Name of Authorized Person: ***Crown & Lance Alumni Association Endowed Scholarship.***

If you have any questions, please contact Amy Reich, Executive Director for Alumni Affairs and Special Events at (516) 463-7580.

Cordially,

The C&LAA Scholarship Committee

*\*Financial need is not required for this scholarship but may be considered. Financial need is calculated by filing the FAFSA (Free Application for Federal Student Aid) at [www.fafsa.ed.gov](http://www.fafsa.ed.gov). Hofstra University's school code is 002732. It will take approximately 3 weeks for Student Financial Services to receive your FAFSA from the time you file it. For more information, contact Student Financial Services at (516) 463-8000.*

**HOFSTRA UNIVERSITY  
CROWN AND LANCE ALUMNI ASSOCIATION  
ENDOWED SCHOLARSHIP APPLICATION  
2023-2024 ACADEMIC YEAR**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ HU ID# \_\_\_\_\_

Family alumnus:      \_\_\_\_ Father      \_\_\_\_ Grandfather      \_\_\_\_ Great Grandfather

Alumnus information:

Name \_\_\_\_\_ Year of graduation \_\_\_\_\_

Degree and Major \_\_\_\_\_

Address/City/State/Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

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 (freshman, sophomore, junior, senior) \_\_\_\_\_

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

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

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Please list, with dates, your employment experience \_\_\_\_\_

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

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

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If you are an entering freshman, do you intend to work during your first year of college? \_\_\_\_\_

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How many brothers and sisters do you have? \_\_\_\_\_

Are you the recipient of any other Hofstra scholarships? \_\_\_\_\_

If yes, please name the scholarship(s) and the amount(s). \_\_\_\_\_

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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.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date