

**HOFSTRA UNIVERSITY
CROWN AND LANCE ALUMNI ASSOCIATION
ENDOWED SCHOLARSHIP
2025-2026**

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, July 25, 2025 to:**

Crown & Lance Alumni Association Endowed Scholarship Committee

Attn: Heidi Goldenberg at
heidi.j.goldenberg@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. On this form, fill in Name of Authorized Person: ***Crown & Lance Alumni Association Endowed Scholarship.***

If you have any questions, please contact Heidi Goldenberg, Director for Alumni Affairs at (516) 463-4134.

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. 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
2025-2026 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

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 Hofstra 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.**

Student Signature

Date

Parent Signature

Date