

SCHOLARSHIP ELIGIBILITY
Academic Year _____



CERTIFICATION OF EMPLOYMENT IN THE 'DIOCESE OF SAN DIEGO'

Scholarship awards are subject to availability of funds. Late applications are not guaranteed awarding of aid.

SECTION 1: Student Information

Last Name

First Name

USD ID #

Position held in the Diocese of San Diego

Site Name

City

State

Zip

USD Program of Study

SCHOLARSHIP ASSISTANCE IS ADJUSTED BASED ON ENROLLED UNITS AND AVAILABILITY OF FUNDS

Please list your estimated units per academic semester/term:

Fall _____ Intersession _____ Spring _____ Summer _____

Student Acknowledgement

By signing below you acknowledge the following provisions:

- Termination of services in the Diocese of San Diego may render scholarship eligibility invalid
- Student is responsible for notifying USD of any changes to the above information

Student's Signature

Date

Submit signed form to supervisor for the Diocese Authorization

SECTION 2: Diocese Authorization

This certifies that the student listed above is employed by the San Diego Diocese and therefore fulfills the prerequisites for applying for a tuition scholarship.

Supervisor (Print Name)
Diocese of San Diego

Supervisor's Signature
Diocese of San Diego

Telephone Number

Date

Certification is valid for one (1) Academic Year including the following terms: Fall, Intersession, Spring and Summer.

RETURN COMPLETED FORM TO:

Please email the completed application form and all required documents as attachments to soles-scholarships@sandiego.edu.

Subject Line: "Scholarship Application - [Your Full Name]"

Attn: Assistant Dean

Attach all documents in PDF format.

Ensure that the total size of all attachments does not exceed 10 MB.