

2. **HOW DOES ONE APPLY?** By submitting for each academic year (by July 1) a completed Scholarship Application for each child for whom scholarship assistance is being requested, but not less than 60 days prior to the date of the student's matriculation (i.e. the first day of classes), clearly noting the academic terms for which assistance is being requested. Any changes in either school attended or terms for which assistance is requested will require an additional application for scholarship assistance.
3. **STUDENT SCHOLARSHIP GRANT ELIGIBILITY:** The terms of the Plan provide that no eligible student shall receive a scholarship grant with respect to more than eight (8) terms if attending school on a semester basis, or twelve (12) terms if attending school on a trimester basis for a bachelor's degree, or four (4) terms for an associate's degree.

Scholarship grants for academic year 2009-2010 will be one-half (1/2) tuition to a maximum of \$15,200 (\$7,600 per semester). Such grants need not be continuous, but no grant shall be made for a term that begins after the student has reached the age of 25 years.

4. **REQUIREMENT FOR PAYMENTS TO SCHOOL:** Please forward a copy of the School's Bursar or Business Office itemized billing statement to the Employee Service Center each term to insure timely payment of each semester/trimester's scholarship award.*
5. The employee number may be found on the employee's paycheck or statement of earnings.
6. **FOR FIRST-TIME APPLICANTS ONLY:** With each initial application for Scholarship Assistance, please submit for the student one (1) legible copy of any document in Column A or two (2) from Column B as listed below:

A	B
Birth Certificate	Driver's License
Baptismal Certificate	Immigration Registration or Visa
U.S. Passport	Naturalization Record
Adoption Papers	Selective Service Registration

7. FORWARD COMPLETED APPLICATIONS AND SUPPORTING DOCUMENTATION (item 6) TO:

YALE UNIVERSITY EMPLOYEE SERVICE CENTER
U.S. Mail: P.O. Box 208256, New Haven, CT 06520-8256
Campus Mail: 221 Whitney Avenue
Phone: (203) 432-5552
Fax: (203) 432-5153
Website Address: www.yale.edu/benefits

NOTE: SCHOLARSHIP APPLICATIONS MUST BE SUBMITTED BY JULY 1 OF EACH ACADEMIC YEAR
 * **An itemized term bill must be submitted each term before payment will be processed.**

IV. EMPLOYEE SECTION (Parent) Employee check here if this is your first time applying for the scholarship benefit for any child.

Name (First, Middle, Last)	Title
Department and Campus Address	University Phone
E-mail address	Home Phone
	Employee Number

I have been employed continuously full-time by Yale University since: _____ / _____ / _____
 Month Day Year

**By signing below, I agree the information above is true to the best of my knowledge and will notify the Yale Employee Service Center of any changes that may occur with my employment status, or that of my dependents' scholarship/grant funding that would impact eligibility of the child scholarship.*

 Parent Signature* _____/_____/_____
Date

<u>To be completed by the Benefits office only</u> PLEASE INITIAL AND DATE Eligibility : _____ School (set up): _____ Documentation: _____	<u>To be completed by the Transaction Center</u> PLEASE INITIAL AND DATE Contact (set up): _____ Payment Processed: _____
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