

# UNIVERSITY OF MINNESOTA

Crookston Campus

Office of Student Financial Aid & Scholarships

4 Hill Hall  
Crookston, MN 56716  
Phone: (218)281-8550  
Toll Free: 1-800-862-6466  
Fax: (218)281-8579

## Berland Grant Application

The grant provides a financial incentive for enrollment in academic college classes for adults who have been out of school for at least five years. The objective is to encourage enrollment at UMC by first-time adult students and adults needing retraining. **The grant will pay tuition and fees for a maximum of four credits, for one semester and required textbook.**

### Eligibility Criteria:

1. Must have been out of school (high school and/or college courses for credit) for a minimum of five years.
2. Must **not** be receiving other financial aid or receive tuition reimbursement from another source
3. Must **not** have earned a baccalaureate degree
4. Course must be academic (i.e., history, psychology, accounting, computer, etc.)

### Return this completed form to:

Office of Financial Aid & Scholarships  
University of Minnesota Crookston  
4 Hill Hall  
2900 University Ave  
Crookston MN 56716

Ph: 800-862-6466  
Ph: 218-281-8550  
Fax: 218-281-8579  
[umc-fa@umn.edu](mailto:umc-fa@umn.edu)

Applicant Information		
Name (last, first, middle initial)	Birthdate	Social Security number
Address (street or P.O. box number, city, state, ZIP code)		Student ID
		Telephone number

Have you earned a college baccalaureate (four-year) degree? YES  NO

Do you have a high school diploma or GED? YES  NO

Date of graduation or GED? \_\_\_\_\_

What year did you last attend school? \_\_\_\_\_

Have you taken any classes from the University of Minnesota, Crookston YES  NO

Have you ever received a Berland Grant? YES  NO

Have you received, or will you receive, any other financial assistance for attending UMC? (i.e, employer tuition reimbursement, etc) YES  NO

For what purpose will you enter UMC? \_\_\_\_\_

List name of course and class number. \_\_\_\_\_

This application is for FALL  SPRING  SUMMER  YEAR \_\_\_\_\_

Certification	
You must sign this form certifying that the information you provided is true. Misrepresentation of facts in connection with this form may be sufficient cause, in and of itself, for cancellation or repayment of grant, whenever discovered.	
Signature	Date Signed