



UMC Employee Grant Application

The grant provides up to \$2,500 per year for immediate family members of current full-time UMC employees.

Eligibility Criteria:

1. Must be enrolled full-time (12+ credits/semester) for full grant amount; amount will be prorated for any student less than full-time
2. Must be a direct descendent or spouse to a current full time UMC employee; dependent up to age 26
3. Must maintain Satisfactory Academic Progress
4. Application must be completed each year

Academic Year 2021-2022

Return this completed form to:

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

Questions?

Ph: 218-281-8550
Fax: 218-281-8579
umc-fa@umn.edu

Student Information			
Last Name	First Name	Date of Birth	Social Security number
Current Mailing Address (street, apt or PO Box number)		Phone Number	Student ID
City, State, Zip code		UMC email	

Full-time UMC employee name: _____

emplid: _____

Relationship to student: _____

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