Peter S. Graybar Memorial Scholarship

Information Sheet

The Peter S. Graybar Memorial Scholarship was created by the Class of 1993 to honor the memory of a beloved friend and classmate. The scholarship is open to any sophomore* who meets the University of Scranton’s scholarship criteria. The Scholarship will be awarded to a student who is active in extracurricular and community service activities and demonstrates personal impact on fellow students. In order to apply, the sophomore must submit two recommendations using the attached forms. At least a close friend of the applicant must write one of the recommendations. Preference will be given to those with financial need; however, this is not a condition for the scholarship. To assist the selection committee you may submit a resume of your activities to the Financial Aid Office and/or to your recommenders.

The scholarship consists of one-half (1/2) of the annual income generated by the principle (funds raised by the Class of 1993). The scholarship will be used to provide financial assistance to the recipient during his/her junior year. The recipient will also receive the scholarship during his/her senior year, as long as he/she continues to meet the University of Scranton’s scholarship criteria. No recipient will receive the scholarship for more than two years.

The University of Scranton’s Financial Aid Office and the current recipient(s) will determine the recipient of the scholarship. The current recipient(s) will notify the new recipient of his/her award.

In order to be considered for the scholarship, applicants must submit the two recommendations to the Financial Aid Office by Friday, March 8, 2016.

*All references to class distinction (sophomore, junior & senior) are to be understood as social and not academic classes.
To the Applicant: This form should be given to an individual who is able to comment on your personal qualities and extra-curricular involvement. Remember, at least one of the recommendations must be written by a close friend. Please fill in the upper portion of this form before you give it to the recommender. It is your responsibility to explain the scholarship to each recommender. Have each recommender return this form (with his/her response attached) to you when he/she is finished.

Applicant’s Name ____________________________________________________
Local Phone # ________________________________
Home Address ______________________________________________________
Home Phone # ________________________________
Signature _________________________________ Date ________________

To the Recommender: On a separate sheet of paper, please answer the following questions in a concise, yet complete manner. Use personal examples whenever possible. After you have answered each question, please sign, date and attach your responses to this form and return it to the applicant. Note that the applicant is under deadline to provide this recommendation.

Recommender’s Name ________________________________________________
Address ____________________________________________________________
Phone ________________________________

1. For how long and in what capacity have you know the applicant?
2. Please comment on the applicant’s personal qualities. Focus specifically on how the applicant displays self-awareness, confidence and vigor for life.
3. Please comment on the extra-curricular involvement of the applicant, especially involvement in student government, campus ministries, sports and community service. How has the University of Scranton Community been enriched by the applicant’s involvement?

The Deadline is March 8, 2017
Submit to the Financial Aid Office
PETER S. GRAYBAR MEMORIAL SCHOLARSHIP
2017-2018
Recommendation Form

To the Applicant: This form should be given to an individual who is able to comment on your personal qualities and extra-curricular involvement. Remember, at least one of the recommendations must be written by a close friend. Please fill in the upper portion of this form before you give it to the recommender. It is your responsibility to explain the scholarship to each recommender. Have each recommender return this form (with his/her response attached) to you when he/she is finished.

Applicant’s Name ____________________________________________

Local Phone # __________________________________________________

Home Address ______________________________________________________

Home Phone # ______________________________________________________

Signature __________________ Date __________________

To the Recommender: On a separate sheet of paper, please answer the following questions in a concise, yet complete manner. Use personal examples whenever possible. After you have answered each question, please sign, date and attach your responses to this form and return it to the applicant. Note that the applicant is under deadline to provide this recommendation.

Recommender’s Name ____________________________________________

Address ________________________________________________________

Phone ________________________________________________________

4. For how long and in what capacity have you know the applicant?
5. Please comment on the applicant’s personal qualities. Focus specifically on how the applicant displays self-awareness, confidence and vigor for life.
6. Please comment on the extra-curricular involvement of the applicant, especially involvement in student government, campus ministries, sports and community service. How has the University of Scranton Community been enriched by the applicant’s involvement?

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