Scholarship Application
Please print all information.

Applicant’s Name: ____________________________________________________________

Loyola ID: ____________________________________________________________________
(Current Loyola University Chicago students only)

Applicant’s E-mail Address: ______________________________________________________

Home Institution: ______________________________________________________________________

I have applied to attend Loyola’s John Felice Rome Center for the (check only one):
☐ Fall Semester only  ☐ Spring Semester only  ☐ Full academic year  ☐ Summer Session I & II

By completing this application, you will be considered for any/all of the scholarships listed below for which you are eligible. The Scholarship Committee will determine which scholarship(s) you receive and the amount of the award based on the required essay and level of financial need.

SEMMESTER AWARDS
- John Felice Rome Center Alumni Class Scholarships: $1,000 - $5,000
- John P. and Mary K. Felice Scholarship: Up to $2,500
- Carol T. Robbins Visiting Student Scholarship: $5,000 - $7,500
- Vogelheim-Hansen Scholarships: $3,000 - $10,000
- Domenico Zipoli Scholarship: $2,600 - $3,400
- Alumni Class Scholarship: $1,000-2,500
- John Felice Rome Center Summer Scholarships: $500 - $3,000

ESSAY
Please submit a concise, 750-words or less, double-spaced typed essay explaining the following three aspects:
1. What do you expect to gain from your time at the JFRC - personally, culturally, academically, and professionally?
2. How will receiving this scholarship affect your plans to study abroad?
3. How your presence at the JFRC will enhance the campus community.

APPLICANT SIGNATURE
If awarded any of these scholarships, I agree to be featured in Loyola University Chicago and/or John Felice Rome Center publications if asked. I also agree to write a brief reflection on my experience in Rome and to attend alumni and/or donor events if asked. I agree to submit a "thank-you" note directly to my benefactor via Donor Relations and to complete the Scholarship Data Form from the Web site LUC.edu/forms/jfrc_scholarship.shtml.

Applicant’s Signature: ___________________________________________________________ Date: __________________

Filling out this application indicates that you are interested in applying for scholarships, but in order to have a complete application and be considered for these awards, please read the eligibility and specific requirements at LUC.edu/rome/scholarships.html.

(Visiting Students: Please fill out the second page of this form as well.)
Visiting students only must have the next portion of the application completed by a Financial Aid Administrator at their home institution.

Loyola University Chicago students do not need to complete this section.

Applicant’s Name: _________________________________________________________________

Home Institution: _______________________________________________________________

Expected family contribution as determined by the 2016-2017 Free Application for Federal Student Aid (FAFSA) Form: $________________________

How much grant and scholarship aid will the home institution allow for study abroad at Loyola’s Rome Center? $________________________

Please indicate if this is: ☐Per year or ☐Per semester

Printed/Typed Name of Financial Aid Administrator ____________________________________ Phone Number _________________________

Signature of Financial Aid Administrator ___________________________________________ Date ____________

Completed forms should be submitted to rome@luc.edu.