

**Memo To Students Receiving Financial Aid
from the
St. John's College Alumni Association, Inc.**

When you are enrolled as a full-time student at your college, university or seminary, take this form to your institution's Registrar or Director of Financial Aid and have them fill out the lower portion and forward it to the St. John's College Alumni Association office by **September 15, 2011** using the enclosed envelope. **Failure to complete this form will result in forfeiture of your scholarship award.**

When these forms from all students who are attending that college, university or seminary are returned to the Association office, one check will be prepared and sent to the institution and a list of those students to which this check applies will be included.

To: St. John's College Alumni Association, Inc.

From: _____

Date: _____

Re: Enrollment Verification

You are advised that (Name of Student) _____

is enrolled as a full-time student at this institution. Please forward their financial aid award to the institution as listed below:

Name of Institution: _____

Address: _____

City/State/Zip: _____

Please print the name of authorizing officer: _____

Signature of authorizing officer: _____

The St. John's College Alumni Association office staff thanks you for your cooperation.

Larry R. Junker
Executive Director