

**AMERICAN ASSOCIATION OF UNIVERSITY WOMEN
North Hills Pittsburgh Branch**

2017 SISTER MATILDA KELLY INCENTIVE GRANT APPLICATION

SECTION 1: BIOGRAPHICAL DATA

Name: _____

Date of Birth: _____ Daytime Phone: _____

Email: _____

Home Address: _____

Date of Graduation: _____ Degree Sought: _____

Please list any other colleges you attended and the dates of attendance.

SECTION 2: DEGREE QUESTIONS

1. What is the name of your program? _____
2. How many credits have you completed as of May 2017? _____
3. How many credits will you be taking next year (if applicable)? _____
4. What is your family yearly income: _____
5. Please list all sources of financial assistance that you have:

SECTION 3: LETTERS OF ACADEMIC RECOMMENDATIONS

Please obtain two letters of reference from members of the La Roche College faculty, on college letterhead, and an official transcript from the registrar that includes grades from the Spring 2017. Letters and transcripts should be sent to: Dr. Linda Clautti, 2640 Timberglen Dr., Wexford, PA 15090. *Please do not wait to obtain these letters, as many of the professors are not available after graduation and during the summer months.*