



**GLENN R. JOYCE SCHOLARSHIP
AFFILIATION DECLARATION**

Student's Name _____ NDId _____
Last First

Permanent Address _____
Street
City State Zip



1. Are you or any member of your family employed by PNC, The Ohio State University, or the University of Notre Dame?

Yes No

2. If yes, please indicate the nature of this relationship:

I certify that all of the information reported on this worksheet is complete and correct. The student and student's parent must sign this worksheet. **Electronic signatures are not acceptable.**

Student Signature _____ Date _____

Parent Signature _____ Date _____

**Please submit signed and completed form to the Office of Financial Aid.
Contact information provided below for email (preferred method) and mail.**

University of Notre Dame | Office of Financial Aid | 115 Main Building | Notre Dame, IN 46556
Email: faforms@nd.edu | Phone: (574) 631-6436 | Website: financialaid.nd.edu