



**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](mailto:faforms@nd.edu) | Phone: (574) 631-6436 | Website: [financialaid.nd.edu](http://financialaid.nd.edu)