

Scholarship Information

Greetings from the Parent Program!

We are excited to share with you information about our Sibs Day Scholarship. This year's Sibs Day will take place Saturday, April 8, 2017. We recognize the financial commitment required for families to attend Sibs Day and are offering a need-based scholarship program to help offset the expenses for attending.

Scholarship information:

The Sibs Day Scholarship provides funding for registration of up to two siblings/family members (\$30 per registrant).

Eligibility requirements:

The Sibs Day Scholarship is designed to provide assistance to the families of those students with high financial need as demonstrated by the student's financial aid application (FAFSA). Preference will be given to those students/families with an Expected Family Contribution of \$0 for the 2016-17 academic year (as determined by the Free Application for Federal Student Aid-(FAFSA). Scholarships will be distributed on a first come, first served basis. Any parent or guardian of a current, full-time undergraduate student receiving financial aid is eligible to apply for a Sibs Day Scholarship.

Application Process:

Please complete and submit the Sibs Day Scholarship Application. Applications are due to the Parent Program by no later than Wednesday, March 15, 2017. Families will be privately notified of decisions via e-mail within two weeks of submitting their application or at the latest by Friday, March 17, 2016. Families receiving the scholarship will be automatically registered for Sibs Day.

You may submit your application one of two ways:

- 1) Email: parent@uwmad.wisc.edu
- 2) Mail to: UW – Madison Parent Program, 1308 W. Dayton St., Suite 329, Madison, WI 53715

Please note that all application documents and Sibs Day Scholarship decisions will remain strictly confidential.

If you have any questions, please contact us at 608-262-3977 or parent@uwmad.wisc.edu.

Parent/Guardian Information

Parent/Guardian Name (First and Last): _____

Mailing Address: _____

City: _____

State: _____

Zip Code: _____

Phone Number: _____

Email Address: _____

Number of People attending Sibs Day (including UW-Madison student or parent): _____

Student Information

Student Name (First and Last): _____

Student ID #: _____

Year in School (as of Spring 2017): _____

Total Expected Family Contribution (as indicated on financial aid award notification letter):

By signing below, I certify that the above information is true and correct. I understand that this application and all Sibs Day Scholarship decisions will remain strictly confidential. I understand that decisions will be based on the Expected Family Contribution determined by the 2016 -17 FAFSA application, and that funding will be awarded on a first come, first served basis. Furthermore, I understand that I will be notified of a decision via e-mail at the latest by Friday, March 17, 2017.

Signature: _____

Date: _____