

SOE Orange Family Scholarship

Parent / Child Information Form

Please download and complete a copy of this fillable form and send to Speranza Migliore, Assistant Director of Graduate Admissions as a PDF via email at smiglior@syr.edu, or mail to Syracuse University School of Education, Office of Academic and Student Services, 111 Waverly Avenue, Suite 230, Syracuse, NY 13210.

If you have any questions about the SOE Orange Family Scholarship or completing this form please contact Speranza Migliore via email at smiglior@syr.edu or telephone 315-443-2505.

Parent / Syracuse University Employee

Parent/Employee Name _____ SUID _____

SU Department of Employment _____ Title _____

Full-time? _____ # of years employed _____ Email _____

Child / SU School of Education Master's Degree Program Applicant

Child Name _____ Date of birth _____

School of Education Master's Degree Application

School of Education Master's Degree Program Title _____

Beginning Semester _____ Full-time? _____

Child's Academic Background

Please list institutions from which your child has or will receive a bachelor's, master's or doctoral degree

Institution _____ Major _____

Degree _____ Degree Award Date _____ GPA _____