## **SPRINGFIELD COLLEGE**



## **SPRINGFIELD PUBLIC SCHOOLS GRANT APPLICATION**

Springfield Public Schools employees enrolled in the education department's graduate Working Teaching Program at Springfield College are not eligible for this grant.

**STUDENT INFORMATION** (to be completed by the Springfield Public Schools-employed student):

Name	Date of Application	
Street Address		
City	State	Zip
Phone Springfield Public Schools Email		
Do you have a Springfield College student ID #? Yes No If yes: Your student III  Undergraduate Student Graduate Student  Live your program yet? Yes No If yes places note that your grant of		
Have you begun your program yet? Yes No If yes, please note that your grant at If no, to which term are you applying? Fall Spring Summer Year		based upon the term you entered
Campus: Boston Greater Houston Milwaukee Springfield		Online
Please note: This grant is for all bachelor, master, and doctoral degree programs at the ma	ain campus, regional (	campuses, or online.
Student's Signature		Date
SPRINGFIELD PUBLIC SCHOOLS INFORMATION (to be completed by the Senior	Administrator of Huma	an Resources):
Senior Administrator of Human Resources Name		
Street Address		
City	State	Zip
Phone Springfield Public Schools Email		
Is the applicant a current regular employee (permanent for 20 hours or more) of Springfie	eld Public Schools?	☐ Yes ☐ No
Senior Administrator of Human Resources Signature		Date

## Please return completed application to:

Springfield College, Office of Financial Aid 263 Alden Street, Springfield, MA 01109 Phone: (413) 748-3108 (main campus), (413) 748-3112 (regional and online students) Email: financialaid@springfield.edu springfield.edu/springfieldpublicschools