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One-Third Tuition Mission Grant Program

| | |
|--|---|
| Student Name: _____ (Please print) | Loyola ID: _____ (Your 11-digit Loyola ID number begins 0000) |
| Student Email: _____ | |

This form certifies that you are a qualified student eligible to receive a one-third tuition grant from the university, applied to the specified term of enrollment identified below. You are required to pay one-third of your charged tuition, and a sponsoring agent agrees to pay the remaining one-third. The student portion may be paid through student loans, but it cannot be cover by any additional university scholarships, assistantships or grants. This form must be completed each term of enrollment.

Please identify your partnering school/program:

| | |
|------------------------|--|
| Cristo Rey: _____ | Member of a Religious Order working in developing countries: _____ |
| St. Ignatius: _____ | International Jesuits: _____ |
| Loyola Academy: _____ | Archdiocesan Leadership Program: _____ |
| Christ the King: _____ | Big Shoulders _____ |

Please select the term this grant should be applied (check only one term):

| | | |
|-------------|---------------|---------------|
| Fall: _____ | Spring: _____ | Summer: _____ |
|-------------|---------------|---------------|

Student Signature: _____ **Date:** _____

This section must be completed by the paying sponsor

| | |
|--|------------------------------|
| Name: _____ (Please print) | Title/Position: _____ |
| Email: _____ | Phone #: _____ |
| Address (where to send the invoice): _____ _____ | |
| Signature: _____ (digital signatures not accepted) | |
| Date: _____ | |