



Worcester Institute for Senior Education

# WISE Scholarship Request

I, the undersigned, wish to join WISE but am unable to pay the full membership fee.

I understand that a limited number of partial scholarships are available toward the membership fee and are ordinarily for only one year.

I would like to be a member of WISE because:

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I am requesting that a scholarship be granted to me for:

\$200 for Full-year membership \_\_\_\_\_ (I agree to pay the balance due \$45)

\$120 for Half-year membership \_\_\_\_\_ (I agree to pay the balance due \$25)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Submit request to: WISE/Assumption College, 500 Salisbury St., Worcester, MA 01609

Email: WISE@assumption.edu Telephone: 508-767-7513

You will be informed by letter of the amount of the scholarship with instructions for registering for courses. Your privacy regarding this scholarship request will be honored.

SCHOLARSHIP APPROVED/NOT APPROVED: (circle choice)

WISE Treasurer: \_\_\_\_\_

WISE President: \_\_\_\_\_

DATE: \_\_\_\_\_