

Student Name: _____

For Office Use Only	
COMMKEY	9YARDI
CHECKLIST	9YARDI

Stony Brook ID:

Office of Financial Aid & Scholarship Services Yardi Scholar Cohort Application

Contact Email:	Phone Number:
This is a four (4) year renewable \$10,000 scholars Business at Stony Brook University.	hip for new incoming freshman that have applied to the College of
 Demonstrate high academic achievement Preference will be given to students who with DREAM status are not excluded. Preference will be given to students who had and Scholarship Services based on corrand/or the Tuition Assistance Program (TA) Represent the beliefs and values of integrand community service that are at the core of "Take care of our clients, take care of our 	demonstrate financial need as determined by the Office of Financial mpletion of the Free Application for Federal Student Aid (FAFSA)
Application Essay Question: Give an example of a time you've exhi Communication, Respect, Innovation, Are you a first-generation student?	•
Student Signature Application Deadline: March 15th	Date
Submit Application To: Stony Brook University, Office of Financial Aid & Schola Stony Brook Union, Suite 208 Stony Brook, NY 11794-3	•

Submit via Email: finaid@stonybrook.edu Subject Line: Yardi Scholar Cohort Application

For secure and faster processing, submit this form via the Upload Process located in your SOLAR To Do List.

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