



capri.edu  
 15815 rob roy drive  
 oak forest, illinois 60452  
 708-687-3020  
 1938 e. lincoln hwy  
 new lenox, illinois 60451  
 815-485-3020

pivot point  
 MEMBER SCHOOL



*Legacy Tuition Scholarship Application*  
 For Classes Starting November 2019 thru June 2020

**STUDENT:** Deliver the following to Capri: 1) This Legacy Tuition Scholarship Application, and 2) An Official H.S., Home School or GED Transcript.

**ALUMNI:** Submit a letter of recommendation to the Scholarship Committee. Include the student’s name, your relationship and a why you are recommending the student to Capri.

**DELIVERY METHOD:** Email to Capri at: ([admissions@capri.edu](mailto:admissions@capri.edu)) attention: Scholarship Committee.

**DEADLINE:** Ten (10) days prior to class start date by 3:00 p.m. No Exceptions.

\_\_\_\_\_  
 PRINT First Name Middle Last Name

\_\_\_\_\_  
 Permanent address (number and street) City State Zip

\_\_\_\_\_  
 (Area code) Home phone number E-mail address (if available)

\_\_\_\_\_  
 (Area code) Cell phone number May we text you at this number:  Yes  No

\_\_\_\_\_  
 High School Attended / GED Graduation Year or GED Date

Applying to:  Oak Forest  New Lenox

Name of Alumni recommending you for the program: \_\_\_\_\_

From which Capri campus did the Alumni graduate? \_\_\_\_\_

Alumni’s place of employment: \_\_\_\_\_ Phone: \_\_\_\_\_

Please describe what your life may look like after graduating from Capri: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- I hereby certify that all information is true and correct. I understand that any misrepresentation of the facts may Result in a scholarship denial or cancellation.
- I understand scholarship funds are subject to maintaining a 90% GPA and attendance throughout the program.

Signature \_\_\_\_\_ Date signed \_\_\_\_\_