University of Kentucky
Office of Academic Scholarships

Legacy Tuition Program Application
2015-2016

DEADLINES:
Fall Semester – March 2, 2015
Spring Semester – December 1, 2015

Office of Academic Scholarships
University of Kentucky
128-E Funkhouser Building
Lexington, KY 40506-0054
(859) 257-4198
Email: academicscholar@lsv.uky.edu
www.uky.edu/AcademicScholarships
Through the Legacy Tuition Program, the University of Kentucky offers partial tuition awards to eligible non-resident undergraduate children of UK graduates. An eligible student is defined as a child whose mother, father, or step-parent has earned a bachelor, graduate, doctorate, or professional degree from the University of Kentucky, whose parent or step-parent is a member of the UK Alumni Association, and who would normally be subject to non-resident tuition rates.

Please note completion of a medical or dental residency does not constitute a qualifying degree program. Also, parents that completed an associate's degree from a former UK Community College are not considered qualifying graduates.

Non-resident students approved for in-state tuition rates through the Academic Common Market (ACM) are not eligible to receive funding through the Legacy Tuition Program. For more information on ACM, please visit www.uky.edu/Registrar/acad_cmn_mkt.htm.

Unfortunately, the benefits of this program cannot be extended to grandchildren or other relatives of UK graduates.

Applicants for the Legacy Tuition Program are required to submit the following to the Office of Academic Scholarships no later than March 2 for fall enrollment or December 1 for spring enrollment:

- Completed Legacy Tuition Program Application (this form) bearing the student's and qualifying parent's signatures and date of application.
- Copy of Birth Certificate or Adoption Records of Student (listing student and qualifying parent).
- In case of step-parent, copy of marriage license.
- IN ADDITION, all applicants (incoming freshmen and transfer) must have applied for admission and have a qualifying test score and high school transcript with qualifying unweighted GPA on file with the Office of Undergraduate Admission by the Legacy Tuition Program deadline, March 2 for fall applicants or December 1 for spring applicants. Transfer applicants must also submit official college transcripts to the Office of Undergraduate Admission.

Students are required to complete the Legacy application in order to receive the benefits. The deadline to apply for the fall semester is March 2 or December 1 for the spring semester.

**Legacy Tuition Program Awards**

- Students applying with a minimum 1360 SAT (Math+Reading) or 31 ACT and a 3.50 unweighted high school grade point average (as calculated by the UK Admission Office) will receive the difference between resident and non-resident tuition rates, for up to 8 semesters of undergraduate study. These students will be able to attend UK at the rate of in-state tuition.

- Eligible students with a minimum 1250 SAT (Math+Reading) or 28 ACT and a 3.30 unweighted high school grade point average (as calculated by the UK Admission Office) will be considered for a scholarship which provides $4500 per year, for up to 8 semesters of undergraduate study.

- All other eligible students will receive $3000 per year, for up to 8 semesters of undergraduate study.

The University of Kentucky is committed to a policy of providing education opportunities to all qualified students regardless of economic or social status and will not discriminate on the basis of race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, marital status, age, veteran status, or physical or mental disability. Compliance with the Title IX of the Education Amendment of 1972, which prohibits sex discrimination, and with Title VI of the Civil Rights Act of 1964 is coordinated by the Equal Opportunity Office, 13 Main Bldg., University of Kentucky, Lexington, KY 40506-0033, (859) 257-8927.
### Legacy Tuition Program Application 2015-2016

**DEADLINES:**
- Fall Semester – March 2
- Spring Semester – December 1

**Entering Term:**
- ☐ Fall 2015
- ☐ Spring 2016

**Application Classification:**
- ☐ Freshman
- ☐ Transfer

(Please complete High School and Transfer sections below.)

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### STUDENT INFORMATION

Name __________________________ __________________________ __________________________ UK ID # __________________________

Middle Last First

Permanent Address __________________________ __________________________

Street/Route __________________________

City __________________________ State __________________________ Zip __________________________

Social Security Number ____________ ____________ ____________ Telephone Number (________) _______ _______ ____________

Email Address __________________________

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I authorize the Office of Academic Scholarships to verify my enrollment for each semester of my eligibility. I understand this program is for my undergraduate enrollment only and that I must be a full-time student to qualify. I understand that acceptance into the Legacy Tuition Program does not change my residency status for undergraduate, graduate, or professional school admission at UK.

Student Signature __________________________ Date __________________________

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### HIGH SCHOOL INFORMATION

High School __________________________ Name __________________________ City, State (________) _______ _______ Telephone (________)

Date of Graduation __________________________

Cumulative Grade Point Average __________________________

(Uncast, based on a 4.00 scale)

ACT Scores

Test Date English Mathematics Reading Science Reasoning Composite
g

SAT-I Scores

Test Date Mathematics Reading Total (M+R)

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### TRANSFER INFORMATION

(Please list all institutions attended prior to UK beyond high school. List most recent first and attach additional sheets if necessary.)

Current Institution: __________________________

Name __________________________ City, State (________) _______ _______ Telephone (________)

Dates Attended: __________________________

Cumulative Grade Point Average: __________________________

Hours Completed by end of Spring 2015 term: __________________________

Summer 2015 term: __________________________

Fall 2015 term: __________________________

Previous Institution: __________________________

Name __________________________ City, State (________) _______ _______ Telephone (________)

Dates Attended: __________________________

Cumulative Grade Point Average: __________________________

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### QUALIFYING PARENT INFORMATION

If more than one qualifying parent, please list information on back of application.

Name __________________________ UK Alumni Membership # __________________________

Last First Middle (Maiden)

Permanent Address __________________________

Street/Route __________________________

City __________________________ State __________________________ Zip __________________________

Social Security Number ____________ ____________ ____________ Telephone Number (________) _______ _______ ____________

Email Address __________________________

Year degree awarded from UK: __________________________ Degree earned: ☐ Bachelor ☐ Masters ☐ Doctorate ☐ Professional

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I authorize the Office of Academic Scholarships to review my student records and verify the degree I earned from the University of Kentucky. I understand that my Alumni Association membership will be verified each semester my student is eligible for this program.

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### Required Documents:

- ☐ Application (this form)
- ☐ Birth Certificate or Adoption Records of Student (listing student and qualifying parent)
- ☐ In case of step-parent, copy of marriage license

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QUALIFYING PARENT INFORMATION, Continued

Name __________________________________________ UK Alumni Membership # _______________________

Last   First   Middle (Maiden) 

Permanent Address __________________________________ ____________________________________________

Street/Route ____________________________

City ____________________________ State ______ Zip __________

Social Security Number _______ - _______ - _______ Telephone Number (______) _______ - _______

Email Address ____________________________________________________________

Year degree awarded from UK: ____________ Degree earned:  o Bachelor  o Masters  o Doctorate  o Professional

I authorize the Office of Academic Scholarships to review my student records and verify the degree I earned from the University of Kentucky. I understand that my Alumni Association membership will be verified each semester my student is eligible for this program.

Qualifying Parent Signature ____________________________ Date ____________