



DELAWARE - DISTRICT OF COLUMBIA - MARYLAND ASFAA 2026 Scholarship Application

The Delaware–District of Columbia–Maryland Association of Student Financial Aid Administrators (DE-DC-MD ASFAA) awards a minimum of three \$1,000 scholarships each year. This scholarship is made possible through the dedication and generosity of DE-DC-MD ASFAA members. Each year, funds are raised during the Association’s Fall Conference, where members participate in special events, activities, and giving opportunities that directly support the scholarship fund. These efforts allow our community of financial aid professionals to invest in students across our region and help them pursue their educational goals.

TU APPLICATION DEADLINE: February 13, 2026

Student Eligibility and Application Process:

Students must meet the following criteria to be considered for this scholarship:

1. Attend an eligible institution in Delaware, District of Columbia, or Maryland during the July 1, 2025 – June 30, 2026, academic year. An eligible institution is defined as an institution with at least one member with an active membership with the DE-DC-MD ASFAA during 2025-2026.
2. Demonstrate financial need as defined by the FAFSA and the institution.
3. Undergraduates must have a cumulative GPA of at least 2.5 or the equivalent.
Graduates/Professionals must have a cumulative GPA of at least 3.0 or the equivalent.
4. Be enrolled as a full-time student as defined by your institution.
5. Complete the application, essay, and media release form.

Application Guidelines:

Essay: Submit a brief essay, 100 – 250 words, explaining how this scholarship will help you attain your academic or career goals. Suggested content could include your educational and career goals, jobs held while in college, volunteer or community service performed, or any special circumstances that you would like the Scholarship Committee to consider.

Combine the completed forms into a single PDF and email them to scholarship@towson.edu by Friday, February 13.

The TU Financial Aid office will review all TU applicants and can nominate one applicant to ASFAA.

In **March**, ASFAA will select at least three recipients from DE, DC, or MD. If you are selected, TU notify you. Scholarship checks will be made payable to TU and will be issued for the Spring 2026 semester.



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Student Information:

Student Name: _____

Student School ID Number: _____

Name of School: _____

Phone Number: _____

Email: _____

What is your Field of Study (Major)? _____

Anticipated Degree: AA
 AS
 AAS
 BS
 BA
 Graduate/Professional
 Other _____

Student's Statement of Candidacy:

I authorize the DE-DC-MD ASFAA to use the above background information for publicity purposes should I be selected for the scholarship. I also authorize my Financial Aid Office to release information concerning my academic and financial aid history as requested in this application to the DE-DC-MD ASFAA. I understand that I must take my complete application package to my Financial Aid Office to determine my academic eligibility and to complete the certification process.

Student Signature: _____ Date: _____

You must complete the Student Essay Section on the next page to be considered.



Student Essay:

In 100-250 words, please describe how this scholarship will help you achieve your academic or career goals. You may include information about your educational and career goals, jobs held while in college, volunteer or community service performed, or any special circumstances that you would like the Scholarship Committee to consider.



**Delaware – District of Columbia – Maryland
Association of Student Financial Aid Administrators (DE-DC-MD ASFAA)**

Media Release Form

Recipient Information:

Name: _____

Email: _____

Phone: _____

Permission to Use Name, Image, and Testimonial:

I, the undersigned, grant permission to DE-DC-MD ASFAA to use my name, photograph, and any written statements I provide (including thank-you letters or testimonials) in the organization's publications, website, social media, press releases, and promotional or fundraising materials.

Certification Statement:

I understand that:

- My name, image, and testimonial may be used to highlight the impact of the scholarship program.
- I will not receive compensation for the use of this material.
- I have the right to revoke this consent in writing at any time, and the organization will make reasonable efforts to remove my content from future publications.
- I certify that I am at least 18 years of age (or have obtained a parent/guardian's signature below if under 18), and that I have read and understand this release.

Signature: _____

Date: _____

If under 18 years of age:

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____