



**PINE MANOR COLLEGE**  
**ALUMNAE SCHOLARSHIP NOMINATION FORM**  
*(Alumnae Office Copy)*

**NOMINEE INFORMATION**

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Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
High School: \_\_\_\_\_  
School Address: \_\_\_\_\_  
Anticipated graduation date: \_\_\_\_\_

**PINE MANOR ALUMNA INFORMATION**

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Name: \_\_\_\_\_  
Class Year: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
  
Signature: \_\_\_\_\_

*Mail completed form to Pine Manor College Alumnae Office, 400 Heath Street, Chestnut Hill MA 02467-2332 or email to [alumnae@pmc.edu](mailto:alumnae@pmc.edu).*