

Scholarship Affidavit (to be completed by employee)

The Cigna Group Foundation sponsors The Cigna Group Scholars Program ("Program") for dependent children and grandchildren of employees ("Charitable Class") of The Cigna Group and its subsidiaries in the U.S. and Canada. Scholarship America, Inc. administers the Program. The purpose of this Affidavit is to confirm eligibility of an applicant as a member of a Charitable Class.

1. Employee Information

Name

Employer

Years of Service

Phone

Email

2. Applicant information

Name

Address

City

State

Zip

3. Please indicate the applicant's relationship to you:

- ☐ Dependent biological, step-, or legally adopted grandchild living in my household or primarily supported by me
- ☐ Grandchild not living in my household or primarily supported by me

4. Employee Signature

I certify that the information above is accurate to the best of my knowledge

Signature: _____

Date: _____