

# **FOUNDATION FOR LEARNING, ATHLETICS, AND GROWTH**

## **INSTRUCTIONS FOR COMPLETION OF SCHOLARSHIP APPLICATION**

PLEASE READ THIS PAGE BEFORE FILLING OUT APPLICATION

**\*\*\*INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED\*\*\***

### **BASIC REQUIREMENTS**

- I. Applicant must indicate that he/she is a full time high school, undergraduate, or graduate student currently enrolled in (or desiring to enroll in) an accredited private school, college, university or trade school.
- II. Applicant must maintain a minimum 3.0 ("B") Grade Point Average or equivalent while on scholarship (if applicable).

### **SPECIAL REQUIREMENTS**

- I. An essay, no more than ten (10) typed pages, is required for all scholarship applicants with educational and personal goals stated, and (if the scholarship relates to college education) indicating the profession, if any, that you may be interested in pursuing.  
  
To apply for a scholarship, include in your essay a brief statement telling us about yourself and any extracurricular activities you have been involved in. A verification letter adds additional weight to your application.
  - II. Include at least two (2) letters of recommendation from either a teacher or other adult who knows you well. Ask for letters or recommendations immediately. Only two (2) letters are to be sent to the selection committee; any additional letters will not be considered.
  - III. If awarded a scholarship, you are required to attend the undergraduate or graduate school, college, university, or trade school that accepts your admission.
- \*\* Be sure to note in your application any community service/volunteer work you have completed or participated in.
- \*\* Be sure to sign and date your application.

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Office Use Only

**FOUNDATION FOR LEARNING, ATHLETICS,  
AND GROWTH**

**SCHOLARSHIP APPLICATION**

Elig.\_\_\_\_ Inelig.\_\_\_\_  
Major\_\_\_\_\_  
Occup.\_\_\_\_\_  
G.P.A.\_\_\_\_\_  
Cont.\_\_\_\_ /Trans.\_\_\_\_  
Grad.\_\_\_\_\_  
Wk. hrs.\_\_\_\_ Ltr.\_\_\_\_  
Male\_\_\_\_ Female\_\_\_\_

Deadline:\_\_\_\_\_

PLEASE PRINT AND FILL IN ALL REQUESTED INFORMATION

Name\_\_\_\_\_ Telephone(\_\_\_\_)\_\_\_\_\_  
Last First Initial Include Area Code

Current Address\_\_\_\_\_ Street City State Zip

Birthdate:\_\_\_\_\_ Place:\_\_\_\_\_ Age:\_\_\_\_\_ Married?\_\_\_\_\_

Soc. Sec. No.:\_\_\_\_\_ - \_\_\_\_\_ Driver's Lic. No.:\_\_\_\_\_

Please check your race/ethnic group: (This will be used for statistical record keeping information only)

\_\_\_\_\_ Lebanese American \_\_\_\_\_ Black/African-American \_\_\_\_\_ Filipino \_\_\_\_\_ Asian

\_\_\_\_\_ Caucasian/White \_\_\_\_\_ Hispanic/Latino \_\_\_\_\_ Other (Specify)\_\_\_\_\_

U.S. Citizen: \_\_\_\_\_ Yes \_\_\_\_\_ No If not, Visa type \_\_\_\_\_ Amnesty No. \_\_\_\_\_

Are you a veteran? \_\_\_\_\_ Yes \_\_\_\_\_ No Number of months before discharge \_\_\_\_\_

High School Attended \_\_\_\_\_ Graduation Date \_\_\_\_\_  
Month/Year

Desired College Major \_\_\_\_\_

Occupation for which you are preparing \_\_\_\_\_

I will be transferring to \_\_\_\_\_

in \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall

I will continue at \_\_\_\_\_

through \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall

I will complete my undergraduate/graduate school program in the

\_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall

I am presently employed \_\_\_\_\_ Yes \_\_\_\_\_ No Average number of weekly hours

(Please check one) \_\_\_\_\_ Salary \_\_\_\_\_ per week \_\_\_\_\_ per hr.

Where employed: \_\_\_\_\_ / \_\_\_\_\_  
(Company Name) (Company Phone Number)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City/State)

\_\_\_\_\_  
(Zip)

How long employed: \_\_\_\_\_ months \_\_\_\_\_ years Position \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Do you plan to work next semester \_\_\_\_\_ Yes \_\_\_\_\_ No Weekly hours \_\_\_\_\_

If employed, attach verification of employment letter (from your employer) on company letterhead.

# PERSONAL FINANCIAL STATEMENT

(\*If this information is incomplete we cannot process your application)

Complete either Section 1a. or Section 1b. Be as accurate as possible.

**1a.** For candidates living at home or receiving assistance from their family:

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Occupation \_\_\_\_\_ Occupation \_\_\_\_\_

Company \_\_\_\_\_ Company \_\_\_\_\_

How long employed \_\_\_\_\_ How long employed \_\_\_\_\_

Parents combined annual income from wages \$ \_\_\_\_\_

Your annual income from wages \$ \_\_\_\_\_

Are you married \_\_\_\_\_ Unmarried \_\_\_\_\_

Spouse's Annual income from wages \$ \_\_\_\_\_

Family income from other sources  
(i.e., Social Sec., Veterans, AFDC, etc.) \$ \_\_\_\_\_

All other income from sources not  
reported above (i.e., stock dividends,  
gifts from other relatives, prize money, etc.) \$ \_\_\_\_\_

**1b.** For candidates who are financially independent (i.e., you do not receive any support other than listed below):

Your annual income from wages \$ \_\_\_\_\_

Married \_\_\_\_\_ Single \_\_\_\_\_

Spouse's Annual income from wages \$ \_\_\_\_\_

Family income from other sources  
(i.e., Social Sec., Veterans, AFDC, etc.) \$ \_\_\_\_\_

All other income from sources not reported above (i.e., stock dividends, gifts from other relatives, prize money, etc.) \$ \_\_\_\_\_

Ages and names of dependent children or other dependents:

<u>NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Do you receive Financial Aid? \_\_\_\_ Yes \_\_\_\_ No What type \_\_\_\_\_  
How much \$ \_\_\_\_\_ Payment frequency \_\_\_\_\_

I am not eligible for Financial Aid or Public Support for higher education because

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Briefly described any unusual circumstances that affect your financial condition: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, understand and agree that if I am awarded a scholarship by Foundation For Learning, Athletics, And Growth, information about me may be released for publicity purposes or to determine my qualification for receiving the awarded funds. I also understand and agree that if awarded a scholarship, I am required to attend the college, university or trade school applied for and that I must maintain at least a 3.0 ("B") Grade Point Average or equivalent at all times.

Applicant's signature \_\_\_\_\_ Date: \_\_\_\_\_