

The ACFA Community Development LTD. Scholarship

STUDENT APPLICATION FORM

******IMPORTANT******

All information to be directly delivered to the guidance counselor

Date of Application_____

Full Name:_____

(First) (Middle) (Last)

Home Address:_____

Phone:_____ Grade Point Average:_____

In what extra-curricular activities did you participate? (Include both in-school activities and volunteer activities outside of school):

Have you applied for Admission?_____ Have you been accepted?_____

Name of College or University you plan to attend:_____

Intended field of study:_____

Have you applied for other scholarships?_____ Have you been granted a scholarship?_____

If so, name of scholarship(s) and amount. _____

Eligibility:

- 1. Candidates must have been accepted into a 2 or 4 year program at a college or university.***
- 2. Candidate must attend a college or university in the Upper Peninsula.***
- 3. Candidate must have a B or better grade point average.***
- 4. Financial need of applicant may be a consideration.***
- 5. Candidate must attach a Personal Statement, which includes comments on their intended field of study.***
- 6. All completed applications must be returned to the Guidance Office. Failure to turn in your application by the due date will result in being ineligible to apply for this scholarship***

Signature of Applicant_____ Date:_____

PARENT APPLICATION FORM

Name of parent or guardian completing this form: _____

Home Address: _____

Phone: _____

Do you have dependents other than your own family or other extenuating circumstances that should be considered? If yes, please explain:

Please note below any statements you may wish to make which will assist the Scholarship Selection Committee in consideration of the applicant:

I hereby certify that the above statements are correct.

Signature of parent or guardian: _____ Date: _____

RELEASE OF INFORMATION

Signature of Applicant: _____ Date: _____