

Application for the Polish American Congress of Arizona Scholarship

ALL QUESTIONS MUST BE ANSWERED IN FULL AND PAPERWORK SENT IN ONE-SIDED. ELECTRONIC SUBMISSIONS MUST BE IN PDF FORMAT. **APPLICATIONS MUST BE SUBMITTED WITH <u>ALL</u> REQUIRED DOCUMENTS <u>AT THE TIME OF SUBMISSION</u>.**

APPLICATIONS MUST BE STRICTLY RECEIVED BY **OCTOBER 31, 2024 (11:59 PM)**. IF YOU ARE MAILING IN YOUR APPLICATION, THE **POSTMARK DATE** WILL BE USED TO DETERMINE YOUR SUBMISSION DATE.

APPLICATIONS WHICH DO NOT ADHERE TO THESE GUIDELINES WILL BE DISQUALIFIED

ALL INFORMATION WILL BE HELD IN STRICT CONFIDENCE.

1)	Applicant's Name:		
2)	Address:		
3)	Home Phone:	Cell Phone:	
4)	Email:		
5)	Date of Birth:		
6)	Gender	Male 🗌 Female 🗌	
7)	Name and Address of t	ne College/University you will attend:	
8)	In the fall term, you will be:		
		Freshman 🗌	
		Sophomore	
		lunior	
		Senior	
		Graduate Student	
9)	Annual Tuition, exclude	ng fees:	

- 10) Major/Field of Study: ______
- 11) SAT scores: Reading: _____ Math: ____ Writing: _____ and/or ACT Composite Score: _____
- 12) List your participation or membership in professional, cultural, military, ethnic, charitable, religious, or community organizations:

13) Have you taken part in any community, religious, organization, and/or school activities reflecting Polish Heritage? If yes, please specify.

14) List any extracurricular activities in which you have engaged in and any honors, awards, or recognitions you have received:

15) Will you be receiving any other scholarships or grants? If yes, specify the type, source, and the amount of that financial assistance:

THIS APPLICATION FOR SCHOLARSHIP IS SUBMITTED WITH FULL KNOWLEDGE OF THE RULES AND REGULATIONS DETERMINING THE PROGRAM. FAILURE TO COMPLETE ALL THE QUESTIONS OR REQUIREMENTS ON THE APPLICATION, WILL RESULT IN DISQUALIFICATION. IF A SCHOLARSHIP IS AWARDED, THE RECIPIENT PLEDGES TO ABIDE BY THE RULES.

Applicant's Signature	Date
Parent's/Guardian's Signature (Does not apply to applicants 18+)	Date