

FRENCH BUSINESSMEN'S ASSOCIATION, INC.

SCHOLARSHIP APPLICATION

1. Applicant's Name: _____ Age: _____

2. Address: _____

3. Telephone Number: _____

4. High School: _____

5. Principal's Name: _____

6. Indicate your French Heritage: _____

7. Father's Name: _____

Occupation: _____

Paternal Grandfather's Name: _____

Paternal Grandmother's Name: _____

8. Mother's Name: _____

Occupation: _____

Maternal Grandfather's Name: _____

Maternal Grandmother's Name: _____

9. Other Household Dependents of Parents:

Name: _____ Age: _____

School or Work: _____

Name: _____ Age: _____

School or Work: _____

Name: _____ Age: _____

School or Work: _____

10. What Colleges/Universities have you applied to?

11. Where have you been accepted? _____
12. What institution do you plan to attend? _____
13. Estimated annual cost of tuition and room and board: _____
14. Course you wish to major in: _____
15. On the reverse side of this application, please provide the committee with a brief description of yourself including: past or present school, church, employment, community activities, offices held or honors received as well as your future aspirations.
16. PSAT Math _____ Verbal _____ and/or SAT Math _____ Verbal _____
17. Class Rank: Junior: _____ out of _____ Senior: _____ out of _____
18. Please attach a transcript of your high school studies, one letter of recommendation and return this application to the Scholarship Chairman no later than May 8th.

In consideration of my academic record and the facts set forth in this application, I respectfully petition that a scholarship be awarded to me for the academic year 20 ____ - 20 ____ . I affirm that to the best of my knowledge, the information contained herein is true and correct.

Date: _____

Applicant's Signature

Read and Approved: _____
(Parent or Guardian if Applicant is under 18 years of age.)

Please return the completed application to:

www.fba-ct.org

Scholarship Committee
French Businessmen's Association, Inc.
P O Box 1595
Bristol, CT 06011-1595