



# FILIPINO-AMERICAN ASSOCIATION OF JUNEAU

P.O. BOX 35385 JUNEAU, AK 99803

## SCHOLARSHIP APPLICATION FORM

### I. INITIAL COLLEGE SCHOLARSHIP

(12TH GRADE ONLY)

### II. STUDENT INFORMATION

LAST NAME FIRST NAME M.I.  
\_\_\_\_\_

SSN (Optional) DATE OF BIRTH SEX  
\_\_\_\_\_ [ ] M [ ] F

MAILING ADDRESS TELEPHONE NO.  
\_\_\_\_\_

CITY STATE ZIP CODE  
\_\_\_\_\_

### III. OTHER INFORMATION

RESIDENT OF JUNEAU, AK [ ] YES [ ] NO  
MEMBER OF FIL-AM ASSN [ ] YES [ ] NO

### IV. PARENT OR GUARDIAN INFORMATION

(For applicants under 18 years of age, parent or guardian information required)

Last Name First Name M.I.  
\_\_\_\_\_

STUDENT SIGNATURE DATE  
\_\_\_\_\_

*See Reverse Page For Additional Requirements*

