



SCHOLARSHIP APPLICATION

Personal Information:

Last Name: _____ First Name: _____ Middle Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail: _____

Date of Birth _____ City and Country of Birth: _____ Gender: Female Male

Marital Status: Single Married Divorced No. of Children _____

Citizenship: U.S. Citizen U.S. Permanent Resident On Visa Type of Visa _____

Have you ever been convicted of a felony? Yes No If yes, explain in an attachment

Education:

Name of High School: _____ Address: _____

Graduation Date: _____ City: _____ State: _____ Zip Code: _____

High School GPA: _____ SAT Score: _____ ACT Score: _____

Undergraduate College/University: _____ Address: _____

Study Major: _____ City: _____ State: _____ Zip Code: _____

Date Attended or intend to attend:

From _____ To _____ Credit Hours Taken _____ Current GPA: _____

Are you a full time student? Yes No How many credit hours are you taking? _____

Are you currently receiving or will you receive financial Aid? Yes No

Explain:

_____ How Much: _____

Expected Graduation Date: _____

(Attach transcripts)

Family Information:

Father:

Last Name: _____ First Name: _____ Middle Name: _____

Address:

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail: _____

Date of Birth _____ City and Country of Birth: _____

Marital Status:

Married Divorced No. of Children (including you) _____

Employer:

Mother:

Last Name: _____ First Name: _____ Middle Name: _____

Address:

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail: _____

Date of Birth _____

City and Country of Birth: _____

Marital Status:

Married

Divorced

No. of Children (including you) _____

Employer: _____

Employment Information:

List your work experiences for the past four years including name and address of the employers, nature and duration of each work:

Do you plan on working during the period for which this scholarship applies? Where and what type of work?

Extracurricular Activities:

List your extracurricular activities not related to school:

List your hobbies, interests, memberships, etc.:

We require two recommendation letters from non-family people. The recommendation letters can be from teachers/professors, school counselors or community service advisors, work supervisors, employers, etc. Please provide names of the two people who will be submitting the recommendation letters:

1- Name: _____ Relationship: _____

2- Name: _____ Relationship: _____

Recommendation letters may be attached to this application or mailed separately before the deadline

Certification:

I certify that the information on this application is true and correct. I understand that this form is used to establish eligibility for the scholarship and that if I purposely give false or misleading information on this form, It may result in the forfeiture of any awards from this program. I realize that all awards are subject to the decision of the board of directors of the Iranian-American Chamber of Commerce in Central Florida, and the availability of funds. I am also prepared to complete minimum 20 hours of community service during the term of this scholarship, as determined by I.A.C.C.

Signature: _____ Date: _____

*Deadline to send this, and all supporting documents to I.A.C.C. is **June 1st**.*