

**ARMENIAN-AMERICAN CITIZENS LEAGUE
EDUCATIONAL AND SCHOLARSHIP FUND INC.**

SUMMARY STATEMENT –

The application process begins on December 1, 2019 and closes on the deadline of March 1, 2020 for the academic year of 2020-2021 (September 2020 through June 2021).

Our Board of Directors review the combined applications and select the recipients. Award amounts range from \$500 - \$2,000.

The scholarship recipients are notified in April that they have been selected and an awards ceremony will be held in San Francisco, CA.

Scholarships are awarded based on Grade Point Average (GPA), financial need, and community service/employment record.

If, after reviewing the Application Checklist package below, you still have questions, please feel free to email us.

Thank you.

**ARMENIAN-AMERICAN CITIZENS LEAGUE
EDUCATIONAL AND SCHOLARSHIP FUND INC.**

Dear Student:

Thank you for your interest in the Armenian-American Citizens League Educational and Scholarship Fund.

In response to your request, below is the Scholarship Application Form for the 2020-2021 academic school year and a checklist guide.

You need to meet all requirements and include all of the necessary information by the deadline of March 1, 2020 in order to be considered.

All material, including completed application, checklist, summary, two references and an OFFICIAL transcript MUST be postmarked by March 1, 2020. You MUST include your official transcript for the fall quarter or semester for 2019.

Below is the Application Eligibility Checklist.

APPLICATION CHECKLIST ELIGIBILITY REQUIREMENTS

- I am a permanent resident of the United States.
- My permanent residence for the past two years has been California.**
- My overall grade point average (for college level courses) is B (3.0) or higher. (Undergraduate minimum 12 units; Graduate, minimum 8 units)
- I have completed, as a full-time student, one semester/quarter of college.
- I will be a full-time college student for the period this scholarship is intended (2020-2021) academic school year.
- Check here to confirm that you are of Armenian descent
Please specify your Armenian ancestry: Mother, Father, Both

A SCHOLARSHIP AWARDS
CEREMONY WILL BE HELD IN
SAN FRANCISCO, CA

ALL APPLICATIONS MUST BE POSTMARKED
BY MARCH 1, 2020
IN ORDER TO BE ELIGIBLE.

- A summary statement of your educational and professional goal (500 words or less.)
- Completed Scholarship Application Form.
- 2 ORIGINAL letters of reference on official letterhead dated no earlier than 6 months before the deadline, signed with signatory's title, and must be from persons who know of your professional interests and academic potential in your selected major. One letter must be from a college or school instructor or administrator.
- On a separate sheet**, list all of your professional, academic, community, and church activities for the past 5 years.
- TRANSCRIPTS: EVERYONE MUST INCLUDE an **OFFICIAL COPY** of his/her quarter/semester college/university transcript.
- Sign the application form.

>>> Return this completed checklist with your application <<<

Complete the financial portion as completely and as accurately as possible. Parents' income must include any retirement income, investment income, Social Security, welfare and disability benefits.

DEADLINE OF MARCH 1, 2020 WILL BE STRICTLY ADHERED TO.
INCOMPLETE PACKAGES WILL NOT BE CONSIDERED.

Please do not mail by UPS, Federal Express or any other means that will require a signature for delivery. Mail the completed application package to:

**Armenian-American Citizens League
Educational and Scholarship Fund Inc.
Scholarship Awards Chair
Post Office Box 1880
Pacifica, CA 94044A**

**Armenian-American Citizens League
Educational and Scholarship Fund Inc.**

SCHOLARSHIP APPLICATION

PERSONAL INFORMATION:

Name: _____

 First Middle Last

Local Address: _____

 Number & Street City State Zip

Permanent Address: _____

 Number & Street City State Zip

Local Phone: (____) _____ Permanent Phone: (____) _____

Email Address: _____

Date of Birth: _____ Place Of Birth: _____

Marital Status: _____ Number of dependents: _____

Names of Parents or Guardian: _____

Address of Parents or Guardian: _____

 Number & Street City State Zip

Ages of siblings living with parents: _____

How many years have you been a California Resident? _____

Where did you hear about the AACL Scholarship Fund? _____

EDUCATIONAL INFORMATION: OFFICIAL FALL SEMESTER COLLEGE TRANSCRIPT REQUIRED

List all of your educational experiences to date:

	Name of School	Dates attended	Degree	GPA
Undergraduate:	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
Graduate:	_____	_____	_____	_____
	_____	_____	_____	_____

Expected Graduation date (Month/year) _____ Your expected degree _____

Present major _____ Proposed Occupation/Profession _____

College or University you will attend next year: _____

Where will you live during the school year? (Check one)

@home With relatives Dormitory Apartment Frat/Sorority Rooming House

Number of units you expect to carry each semester/quarter: Fall Winter Spring
 (Note: Undergraduate minimum is 12 units; Graduate minimum is 8 units)

I will be taking a class in Armenian Studies this year: Yes No Not Available

ACTIVITIES AND EMPLOYMENT

List high school, college, church and community activities (Armenian and Non-Armenian).
 List employment experience during the last four years.

<u>Type Of Employment</u>	<u>Type Of Company</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

APPLICANT'S FINANCIAL STATEMENT

Estimated income Per Academic Year

Estimated Expenses Per Academic year

Family Contributions \$ _____
Spouse's Contribution \$ _____
Applicant's Summer Earnings \$ _____
Applicant's earnings while in school \$ _____
Scholarships, Grants, etc. \$ _____
Loans \$ _____
Welfare/SS Benefits \$ _____
TOTAL INCOME \$ _____

Tuition and Fees \$ _____
Books and Supplies \$ _____
Housing and food \$ _____
Medical \$ _____
Transportation \$ _____
Other Expenses \$ _____
TOTAL EXPENSES \$ _____

APPLICANT'S ASSETS

Savings \$ _____
Stocks/investments \$ _____
Insurance (cash value) \$ _____
Equity in home \$ _____
TOTAL ASSETS \$ _____

APPLICANT'S LIABILITIES

Loans \$ _____
Mortgage \$ _____
Insurance Premiums \$ _____
Other (Specify) \$ _____
TOTAL LIABILITIES \$ _____

If you have outstanding debts, please list below:

Name of Creditor	Address	Date	Amount

PARENTS'/SPOUSE'S INCOME STATEMENT

(If you are 24 years of age or older, or you are married, or support a dependant more than 50% of the time, do not list your parents' income).

IMPORTANT: You must include total income from ALL sources. Sources include, but are not limited to: salary, income from owned businesses, rental income, pensions, investments, Social Security, welfare, and disability benefits.

PARENTS'/SPOUSE'S OCCUPATION

PARENTS/SPOUSE'S ANNUAL INCOME

Mother _____

Mother _____

Father _____

Father _____

Spouse _____

Spouse _____

This information will be kept completely confidential and must be accurate.
This application will NOT be considered unless these sections are completed.

LETTERS OF REFERENCE

Please submit at least **two** letters of reference from persons who know of your professional interests and intellectual promise in your selected major. One of the letters **must be** from an instructor or school administrator. The letters must be dated NO MORE than 6 months before the deadline.

SUMMARY STATEMENT

Please attach a ONE PAGE summary of your educational and professional goals.

CERTIFICATION (Applicant's statement)

I certify that I meet all of the eligibility requirements in the application completion check-list.

Signature of Applicant _____ Date _____