

Armenian Scholarship Foundation, Inc.
Scholarship Application 2009



REQUIREMENTS	
Qualified Applicants:	The Armenian Scholarship Foundation Scholarships are for U.S. High School Seniors, U.S. Undergraduate Students and U.S. Graduate Students only.
Scholarship Application:	Completed application including all the following information
Most Recent Education Transcript:	High School or College Official or Unofficial Transcript must be included in your application packet.
Essays:	Please attach your essay to the application
Letters of Recommendations:	Letters of recommendation should be in a sealed envelope, signed by the recommender, and included inside your application packet.
Application Deadline and \$10 Application Fee:	Application Fee \$10. Mail or Email the application to the Scholarship Selection Committee By June 15, 2009. ASF will not consider incomplete applications or applications received after June 15, 2009. Please make checks payable to: Armenian Scholarship Foundation
Mail Application to:	Armenian Scholarship Foundation, c/o Scholarship Committee 14 Sandrick Rd. Belmont, MA 02478

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	Date of Birth		
E-mail Address			
Area of Academic Interest			
Name & Mailing Address of College for which this scholarship should be addressed to if you are selected			
Is this scholarship application for	<input type="checkbox"/> College	<input type="checkbox"/> Graduate School	
Is this the first time you are applying	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no when did you apply
How did you hear out about us?			

EDUCATION			
High School		Address	
From	To	GPA:	Degree
College		Address	
From	To	GPA:	Degree/ Major
Other		Address	
From	To	GPA:	Degree/ Major

Please Mail by June 15, 2009 the completed application with transcript, recommendations and a \$10 application fee to:
Armenian Scholarship Foundation, Inc. c/o Scholarship Committee 14 Sandrick Rd, Belmont, MA 02478

ACADEMIC PERFORMANCE		
Name of High School	Name of College	Name of Graduate School
Rank In class: (12 th out of 150) or top 10%:		
SAT Verbal Score:		Graduate Entrance Exam Name:
SAT MATH:		
SAT II:		EXAM SCORE:
SAT II:		
ACT or TOEFL (if applicable):		
CUMULATIVE GPA:	CUMULATIVE GPA:	CUMULATIVE GPA:

Please list in detail your extracurricular activities, work/internship experience, community involvement, awards, honors, and leadership positions.

Organization or Award	Activity/Service	Dates: From – To (mm/yy)	Avg. Hours per Week	Required by School
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

Applicants Proposed Budget for the 2009-2010 Academic Year			
Estimated Resources		Estimated Expenses	
From Parents or Guardian	\$	Tuition	\$
From Relatives or Friends	\$	Room & Board	\$
From Saving or Assets	\$	Student Fees	\$
From Student Earnings	\$	Books & Supplies	\$
From School Aid	\$	Travel	\$
From Other Loans	\$	Other	\$
From Other Sources	\$		
Total Estimated Resources	\$	Total Estimated Expenses	\$
Total Estimated Need Of Applicant (Resources – Expenses) \$ _____			

FAMILY INFORMATION

If applicable, please list all those in your household dependent upon (i.e. supported by) your parent(s) in the 2009-2010 academic year. Include yourself, sibling, and other relatives.

NAME	AGE	NAME OF SCHOOL OR COLLEGE	YEAR IN SCHOOL OR COLLEGE	PARENTS CONTRIBUTIONS	FULL TIME		LIVE AT SCHOOL OR COLLEGE	
					YES	NO	YES	NO
					YES	NO	YES	NO
					YES	NO	YES	NO
					YES	NO	YES	NO
					YES	NO	YES	NO
					YES	NO	YES	NO
					YES	NO	YES	NO

Short Questions ESSAYS (Please answer the following questions, numbered appropriately, on a separate attachment)

The Armenian Scholarship Foundation, Inc. Scholarship Award is available only to U.S. students who are substantially involved in the Armenian Community **or** who are of Armenian descent. For the purposes of this application, the Armenian Scholarship Foundation defines "Armenian descent" as having been born in Armenia or having at least one parent or ancestor whose country of birth is Armenia.

Are you of Armenian descent (as defined above)? Yes No.

If "Yes," please explain below in what way you are of Armenian descent (as defined above). Please be specific.

If "No," please describe in the space below your involvement in the Armenian Community.

ESSAYS (Please answer the following questions on a separate attachment)

Optional: Are there any circumstances that you would like The Armenian Scholarship Foundation, Inc. Scholarship Committee to know?

In 500 words or less, please write an essay based on **ONE** of the following essay topics:

1. How do you believe receiving this scholarship will help you give back to the Armenian community?
2. What has been the greatest obstacle you have faced in your life and how were you able to overcome it?

DISCLAIMER AND SIGNATURE

- I hereby certify that the information provided in this application is true and correct. I have not knowingly withheld any facts or circumstances that could interfere with the truthfulness and accuracy of this application.
- I understand that this application will be available only to the selection committee members and ASF Foundation Staff. I waive the right to access letters of recommendations written on my behalf.
- I realize that accepting The Armenian Scholarship Foundation, Inc. Scholarship Award requires me to register for and complete at least the course load required to retain standing as a full-time student at the institution that I am attending. The award will be made for one academic year.
- I understand that if I receive a scholarship, I must submit a current college transcript to The Armenian Scholarship Foundation, Inc. Scholarship Committee at the end of the academic year along with a summary of extracurricular activities undertaken and any honors or recognition received.
- If selected as scholarship recipient, I give the Armenian Scholarship Foundation permission to release my name, and image for promotional purposes.
- I hereby authorize the release to The Armenian Scholarship Foundation, Inc. Scholarship Committee of any information held or to be held by either secondary school, college, or university officials, or others, including but not limited to personal evaluations and transcripts

Signature**Date**



Academic Recommendation Form **(For High School and College Students ONLY)**

A professor must be the recommender for High School and College Students.

Candidate's First Name

Last Name

Candidate Information (To be completed by teacher of candidate's choice)	
Academic Ability and Achievement (Please answer these questions on a separate page)	
A. How long have you known this candidate? In which courses have you observed this candidate?	
B. Please make a statement about this candidate's academic ability, areas of particular strength, and, if an applicant has not completed at least one semester at a college or university, potential for success in college study.	
Leadership (Please answer this question on a separate page)	
Describe school activities in which the student exhibits leadership.	
This Academic Recommendation Form completed by:	
Professor of:	
Signature	Date



Recommendation Form (For Graduate Students Only)

Option between professor and recent colleague or manager from work

Candidate's First Name

Last Name

Candidate Information (To be completed recommender)	
Academic Ability and Achievement (Please answer these questions on a separate page)	
A. How long have you known this candidate? In which capacity have you observed this candidate?	
B. Please make a statement about this candidate's intellectual ability and strengths.	
Leadership (Please answer this question on a separate page)	
Describe activities in which the applicant exhibits leadership.	
This Recommendation Form completed by:	
Title:	
Relationship to Candidate:	
Signature	Date: