

SCHOLARSHIP APPLICATION (ATAP FORM AC-1)
(Deadline: April 1, 2008)
(ATAP Foundation Scholarship Program)

I. PERSONAL INFORMATION

Applicant Name: _____

Social Security No. _____

Address: _____

Home Phone: (____) _____ - _____ Birth Date of Applicant: ____/____/____ (Month, Day, Year)

Graduation Date: ____/____/____ (Month, Day, Year)

Name of High School : _____

Complete Address of High School: _____

Name and address of College, University, Vocational School or Technical School you plan to attend:

Will you be a full-time student Yes _____ No _____

Major/Area of Educational Concentration or Study _____

U.S. Citizen: Yes ___ No ___ If no, do you have Permanent Resident status: Yes ___ No ___

II. GRADE POINT AVERAGE/TRANSCRIPT. Cumulative High School GPA _____ out of a scale of ____.

Please attach a copy of your OFFICIAL TRANSCRIPT from your high school. Transcripts for all high schools attended must be submitted. DO NOT SEND THE TRANSCRIPT(S) SEPARATELY.

III. PERSONAL ASPIRATIONS/CAREER GOALS. In 500 words, please describe why you selected your Major/Area of Educational Concentration or Study, your personal aspirations, and educational and life goals. Please describe within these pages the importance scholarship assistance would have for you in meeting these goals. Please note circumstances that make you particularly eligible for this scholarship. (Attach separate sheets.)

IV. VOLUNTEER/WORK EXPERIENCE OR SCHOOL ACTIVITIES. Please describe in the space provided or on a separate sheet recent volunteer experience, work experience, and school activities.

V. LETTERS OF RECOMMENDATION. Please provide three letters of recommendation. One must be a former or current teacher, one from a school administrator familiar with your academic work and the third from an individual (not a relative) familiar with your character. The letter of recommendations from your teacher and school administrator should be on their respective school letterhead.

VI. FINANCIAL NEED. Please provide your family's estimated combined annual income in U.S. dollars:

_____.

In the space provided or on a separate sheet of paper please describe any circumstances related to your family's financial status which would give the Scholarship Committee a better understanding of the importance of this scholarship.

VII. CERTIFICATION

I certify that all the information on this form is true and complete to the best of my/our knowledge. If asked by any authorized official of ATAP Foundation, I agree to give documentation for information given on this form. I realize that this proof may include a copy of a U.S. tax return and/or state income tax return. I realize that failure to comply with a request for further information may prevent the applicant from being considered. I understand that the financial information will be confidential, for review solely by ATAP Foundation.

Applicant's Signature & Date _____

SUBMIT COMPLETE APPLICATION, INCLUDING ALL DOCUMENTATION.
APPLICATIONS WILL NOT BE CONSIDERED UNLESS COMPLETE.
DO NOT SEND MATERIALS SEPARATELY.

Checklist for attachments:

- Application completed and signed
- Personal statement
- Copy of official school transcript
- Three original recommendation letters