ALBERT A. CHRIST SCHOLARSHIP FUND

Application for Scholarship

GENERAL INFORMATION

l.	Full Name Soe Sec No.					
2.	Address Home Telephone					
3.	AgeDate of BirthPlace of Birth					
4.	Which college do you plan to attend?					
5.	Which course do you plan to study?					
6.	What vocation or profession do you expect to follow after completing college?					
7. List of high schools and colleges you have attended:						
	Schools From To					

8.	3. List extracurricular activities in high school and college and positions held:					
9.	List the following teachers and counselors, etc., who are familiar with your school records and activities:					
	Academic Counselor					
	Teacher or Principal					
	Do you consent to have the Trustees interview them?					
1 1.	List activities, other than connected with school, in which you have participated during the last three years, and positions					
	held:					
12.	. Father's name					
13.	Mother's name					
14.	Parent's marital status - Indicate (1) Married and living together; (2) Separated or (3) Divorced.					

15.	Do you live with your pa	rents?	A	re you married?	***************************************		
16.	16. Names, ages and schools attended by brothers and sisters:						
	Name	Age	-	Yrs. Completed			
••••	`		[*^*}**********************************				
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17.	Father's place of employment						
18.	18. Mothers place of employment						
19.	9. Have you been employed at any time during the past two years?						
	If so, list names and addresses of employers						
	Job Description						
20.). List college you plan to attend (include address)						
	(1) Tuition/Fees	\$	**************************************				
	(2) Room/ Board	\$	4 >>+ ->+				
	(3) Books/Supplies	\$	***************************************				
	(4) Personal Expenses	\$					
	(5) Transportation	\$	*1*********				
	Total	\$	**************************************				
21.	21. How much of the estimated amount of next year's educational expenses will you be able to provide?						
	From your savings	\$	***************************************				
	From your family						
	From other sources	\$	****************************				
e .	Total	\$	************				
22.	2. How much do you request as a scholarship award for the next academic year (specific amt.) \$						
23.	Required items: (The following items are required for your application file to be complete.)						
	(1)	ECA Domest					
	``	AFSA Report of high school g	rades				
			ip Fund Application.				
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				CERTIFICATE I consent to have my son application. I have read questions and believe	or daughter file the above the answers to the above		
_	Signature of Studen	<u> </u>		Signature of Parent			

Date

Date