

NJVACA SCHOLARSHIP APPLICATION FOR 12TH GRADER

Please type your answers.		
1.	First Name: Last Name:	
2.	Mailing Address	
	Street:	
	City: State: Zip:	
3.	Daytime Phone Number: Is it a mobile phone? ☐ Yes ☐ No	
	Email Address:	
4.	Date of Birth (<i>MM/DD/YYYY</i>): Gender:	
5.	A. GPA from the last trimester/semesters of 12 th Grade: B. Extra Curriculum: 1) List school activities: (e.g. Member of Chess club, sport teams, or others) 2) List the accomplishment(s): (e.g. Student president, Honor Society, Sport or other Awards, etc.)	
	3) Community services: (e.g. Participated in NJVACA activities, and/or others) (Please attach all high school report card, along with award certificates and/or awards if any)	



6.	Name and address of high school attending:	
7.	Name and address of parent or legal guardian (if different from your address listed in question #2 above)	
	Name(s):	
	Street:	
	City: State: Zip:	
	Phone # of parents or legal guardians: Is it a mobile phone? \[\subseteq \text{Yes} \] No	
8.	Parent annual income range (please check a box):	
	☐ Under \$60,000	
	☐ \$60,000 − \$100,000	
	☐ More than \$100,000	
STATEMENT OF ACCURACY FOR STUDENTS		
I, hereby, affirm that all the above stated information provided by me is true and correct to the best of my knowledge.		
I also consent that, if chosen as a scholarship winner, NJVACA may take my photo(s) and uses for promotion of the scholarship program.		
I hereby understand that if chosen as a scholarship winner, I must be present at NJVACA's Tet event to receive my scholarship award. In case I can not attend the event in person because of some valid reason, my designated family member(s) can attend the event to receive the award on my behalf. NJVACA will make an exception on case by case basis.		
inforn	by, understand that I will not submit this application without all required attachments and supporting nation. Incomplete applications form or applications that do not meet eligibility criteria will not be considered for holarship.	
Signat	ure of scholarship applicant: Date:	

Please send a copy of this filled-out form along with all required and supported documents to email address below: NJVACAScholarship@gmail.com