

Polish University Club of Los Angeles Scholarship Application Form

Applicant Name: _____ SSN: _____ - _____ - _____

First MI Last

Address: _____ Apt#: _____ Phone Number: (_____) _____ - _____

City State ZIP

E-mail: _____

Date of Birth: ____ / ____ / ____ Place of Birth: _____

MM DD YY City State/Country

Mother's Maiden Name: _____

Current Cumulative GPA: _____ Most Recent Quarter/Semester GPA: _____

Education History

Dates Attended	School Name & Location	Degree Attempted	Degree Received?	Currently Enrolled?
			Yes / No	Yes / No
			Yes / No	Yes / No
			Yes / No	Yes / No

Name of College You Will Be Attending Next Fall: _____

School Name Location

Other Scholarships or Grants for Which You Have Applied and/or Been Awarded
(They Will Not Count Against Your Award)

Year	Name of Scholarship/Grant

Your Work Experience During the Past Two Years

Dates Employed	Employer Name	Contact Information	Name of Supervisor	PT or FT
				PT / FT
				PT / FT
				PT / FT

Do You or Does Any Member of Your Family Belong to the Polish University Club? ____ Yes / ____ No
 If Yes, Name of Member: _____

APPLICATION AND ALL ACCOMPANYING DOCUMENTATION MUST BE RECEIVED BY THE SCHOLARSHIP COMMITTEE NO LATER THAN APRIL 15, 2006. FAILURE TO COMPLY WILL RESULT IN YOUR DISQUALIFICATION.

I attest that all statements made on my application and all information provided are true and accurate to the best of my knowledge.

Signature of Applicant: _____ Date: _____