

Polish University Club of Los Angeles Scholarship Application Form

Applicant Name: _____

Permanent 'Cf f tguu: _____ a _____ Phone Number: (_____) _____ - _____

_____ Personal e-mail: _____

Date of Birth: City _____ / State _____ / ZIP _____ MM / DD / YY Place of Birth: _____ 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 Have 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 POSTMARKED NO LATER THAN APRIL 20, 2024. FAILURE TO COMPLY WILL RESULT IN DISQUALIFICATION.

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

Signature of Applicant: _____ Date: _____