

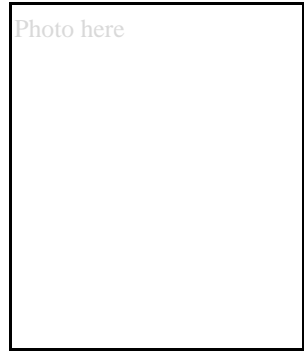


CHADE FOUNDATION SCHOLARSHIP FOUNDATION

APPLICATION FOR SCHOLARSHIP

PART I. PERSONAL INFORMATION

(Please fill in all requested information)



1. **Name :** _____
Last First Middle

2. a. **Current or school address**

Street number and name(with apt. #) : _____

City : _____ State : _____ ZipCode : _____

Phone Number : () - _____ Cell phone number : () - _____

b. **Permanent or home address (if different from current or school mailing address)**

Street number and name(with apt. #) : _____

City : _____ State : _____ ZipCode : _____

Phone Number : () - _____ Cell phone number : () - _____

3. a. **Email address** Primary : _____

Secondary : _____

b. **Social Security Number :** _____

c. **Date of birth :** _____
Month Day Year

d. **Place of birth :** _____ (City or Country)

e. **Sex :** Male () Female ()

f. **Marital status :** Single () Married () Other ()

g. **Status :** U.S. citizen () Permanent resident () Student visa ()

4. a. School name and address - During the Scholarship Year:

Name and address of the school you will be attending during scholarship year :

(Note: if you will be attending a school that is different from your current school during the scholarship year, please submit a proof of admission from the new school (and a copy of your letter to such school officially notifying your decision to attend) or explain the reasons for not submitting to us such proof and letter):

School name:

Address:

b. Year in school - During the scholarship year:

High school: Junior () Senior () ;

College: Freshmen () Sophomore () Junior () Senior ()

Graduate: Master () Doctorate () Other ()

5. a. School name and address - Current:

Name and address of the school you are currently attending (if different from number 4(a) above):

School name:

Address:

b. Current year in school:

High school: Junior () Senior () ;

College: Freshmen () Sophomore () Junior () Senior ()

Graduate: Master () Doctorate () Other ()

6. a. Major :

b. Degree :

c. Expected date of graduation :

7. a. GPA (on a 4.0 scale): (/4.0)

(Note: This GPA must match the GPA stated in your official transcript(s)– if the above GPA is different from your transcript GPA, please explain below:

b. SAT or ACT Score: Total () Date taken: ()

Math (); Critical Reading (); Writing ()

(SAT and ACT scores are required only for those students who are currently high school seniors or will be high school seniors during the scholarship year)

8. Your plans upon graduation from high school, college or graduate school:

12. In 500 words under or less, please let us know any other information that you would like us to consider in reviewing your application. This section should be as brief as possible, and no points will be deducted for leaving this section blank.

13. Recommendations:
- a. List below two faculty members who best know your academic qualifications, including your academic performance, potential, and motivation.
- b. Request these individuals to send letters of recommendation directly to CHADE FOUNDATION.

- c. As a supplement (but not as a requirement), you may have one non-faculty person who has known you for more than two years to submit to his or her recommendation on your behalf (please limit this to one additional recommendation).

Name	Address	Position, Institution and Relationship

14. Have you previously received a CHADE FOUNDATION scholarship? Yes () No ()
(Note: We encourage past CHADE FOUNDATION scholarship recipients to apply for our scholarship.)

The amount: \$_____

PART III. RECOMMENDATION LETTER

1. Name : _____

2. Address : _____

3. Phone : _____ Fax : _____

4. Reason for Recommend. _____

Name: _____

Signature: _____

Date: _____

PART IV: ACKNOWLEDGMENT, AGREEMENT AND SIGNATURE

I hereby certify, acknowledge and agree as follows:

1. To the best of my knowledge and belief, the information I have provided in this application and my supporting documents are true and correct.
2. I have not knowingly withheld any facts or circumstances that could mislead CHADE FOUNDATION.
By submitting this application, I am giving my approval for CHADE FOUNDATION to verify all information I have provided to CHADE FOUNDATION and, when requested, I will fully cooperate with CHADE FOUNDATION in this endeavor.
3. I agree that CHADE FOUNDATION, in its sole and absolute discretion, retract at any time my scholarship from CHADE FOUNDATION in case my application or any of my supporting documents submitted to CHADE FOUNDATION contains any false or misleading information.
4. I understand it is my responsibility to ensure that my application and all supporting documents are (i) clearly marked with my name and social security number, (ii) submitted to the CHADE FOUNDATION and (iii) postmarked by the deadline set by the CHADE FOUNDATION.
5. I understand and agree that (i) the scholarship decision of the CHADE FOUNDATION made at its sole and absolute discretion, (ii) such decision shall be deemed final, and (iii) such decision shall not be subject to further review, reconsideration, challenge or appeal.
- 6.

Name: _____

Signature: _____

Date: _____