

THOMAS COUNTY AREA FAMU ALUMNI ASSOCIATION
APPLICATION FOR SCHOLARSHIP

Please print or type. All blanks must be completed. Use N/A when not applicable.

PERSONAL INFORMATION

Name _____

Home Address _____

Telephone Number _____ Cell Number _____

E-mail _____

Date of Birth _____

Male () Female ()

Marital Status _____ Married _____ Single

Father's Name _____

Mother's Name _____

EDUCATIONAL INFORMATION

High School Presently Attending _____

What is your cumulative grade point average? _____

Have you taken the college entrance exam? _____ If no what date will you take it? _____

ACT Score _____ SAT Score _____ Other _____

Have you applied for admission to FAMU? _____ Yes _____ No

Have you been accepted for admission to FAMU? _____ Yes _____ No

Applying for semester beginning _____ Fall _____ Spring _____ Other

What is your chosen course of study? _____

OCCUPATIONAL INFORMATION

List all activities that you have participated in while in high school:

List Clubs/Sports/Community Activities/Other

List any relatives that attended, graduated, or is attending FAMU

NAME	RELATIONSHIP	GRADUATED
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Signature _____

Date _____

Please attach an essay “ Why I Want to Attend FAMU?”