

FRIENDS OF ASIAN AMERICAN ADVISORY BOARD., INC.

ASIAN AMERICAN STUDENT SCHOLARSHIP APPLICATION

Instructions:

Information provided must be typed or printed legibly. Attach additional paper, if necessary.

Deadline: Application must be received by Scholarship Committee no later than 5:00 p.m. August 01 of each year. Application received after the deadline will not be considered.

Date of Application \_\_\_\_\_

Name (Last) : \_\_\_\_\_ (First) \_\_\_\_\_ (M.I.) \_\_\_\_\_

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Res: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home Address: \_\_\_\_\_ Apt. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

High school/-College Student:

High School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Guidance Counselor Name: \_\_\_\_\_ Phone Number : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ACT/SAT scores: \_\_\_\_\_ GPA: \_\_\_\_\_

Department Affiliation / Year: \_\_\_\_\_

College/Institution Name/City & state \_\_\_\_\_

Address: \_\_\_\_\_

Major GPA: \_\_\_\_\_ Over all GPA: \_\_\_\_\_

Name of College you will be attending: \_\_\_\_\_

Applicant Place of birth: \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_

Are you a U.S. Citizen? Yes \_\_\_ No. \_\_\_ , if no what is your nationality? \_\_\_\_\_

List any foreign languages you speak, read or write and indicate your proficiency:

A=Fluent B=Good C=Fair

Language	Speak	Read	Write
----------	-------	------	-------

(2)

1. List any clubs or organizations outside of school you belong to which involves community service or volunteer work. Summarize you activities and dates of participation in reverse chronological order (most recent activities first).

2. List any awards and recognitions; academic, community, athletic achievements you have received in the past one to three years (list in reverse chronological order).

3. What do you foresee yourself doing 5 years from now? It can be professionally, personally and/or academically.

(3)

4. Are you currently employed? If so, please describe your current job positionm duties and responsibilities; hours you work per week.

5. Tell us anything else, why I need the scholarship?

**Recommendations:**

- a. Two letters of recommend must be submitted along with the applications - One of the recommendations must be .  
from a faculty member.
- b. Please attach a 2 x 2 photograph
- c. The applicant must be able to attend the scholarship awards ceremony on **Saturday, April 7, 2012, at 6:00 p.m.**, at the University of Miami, Storer Auditorium, in Coral Gables, FL.  
provided to the successful applicants).

**FINANCIAL SUMMARY**

Estimate College Expenses:

**EXPENSES:**

Tuition & Fee \$ \_\_\_\_\_  
Room & Board \$ \_\_\_\_\_  
Books/Supplies \$ \_\_\_\_\_  
Transportation \$ \_\_\_\_\_  
Personal Expenses \$ \_\_\_\_\_  
Total Expenses \$ \_\_\_\_\_

**INCOME:**

Loans \$ \_\_\_\_\_  
Job/Work Study \$ \_\_\_\_\_  
Grants: Pell etc. \$ \_\_\_\_\_  
Scholarship Awards \$ \_\_\_\_\_  
Family Contribution \$ \_\_\_\_\_  
Other Gift \$ \_\_\_\_\_  
Total Income \$ \_\_\_\_\_

**SUBSTRACT INCOME FROM EXPENSES:**

Total Expenses \$ \_\_\_\_\_  
Total Income \$ \_\_\_\_\_  
Available Funds \$ \_\_\_\_\_

**VERIFICATION**

I affirm that the information included with my application is correct and true to the best of my knowledge. I also affirm that the scholarship award of funds is contingent upon my enrollment in an accredited college listed on my application, and that the scholarship funds, if awarded, will be used towards the cost of my education. I further affirm that, as a condition of receiving the funds, I will submit a progress report at the end of each semester for a period of one year.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this application by March 1<sup>st</sup> to:  
S. Shawn Khosravi, Chair  
Asian American Advisory Board Scholarship Committee  
299 Alhambra Circle, Suite 404  
Coral Gables, Florida 33134  
Phone: (305) 461-0667  
Fax: (305) 461-0656