

The American Educational Scholarship Fund Application

Application deadline June 1

* Required
Completeness and neatness ensure your application will be reviewed properly.

Name *

First Name Last Name

Permanent Address *

Street Address

Street Address Line 2

City State / Province

Postal / Zip Code

Phone Number *

Area Code Phone Number

E-mail *

Date of Birth *

Month Day Year

Social Security (last 4 digits: XXXX) *

HIGH SCHOOL DATA

HS Name *

HS Graduation Date *

Month Day Year

HS Address *

Street Address

Street Address Line 2

City State / Province

Postal / Zip Code

HS Phone Number *

Area Code Phone Number

POST-SECONDARY SCHOOL DATA

Name of four-year college or university you plan to attend. (If unknown, please list in order of preference the schools to which you have applied). Use official school names. Do not use abbreviations.

School Name *

School Name City, State

School Name

School Name City, State

School Name

School Name City, State

Year in School *

Major Course of Study *

Expected Graduation Date *

Month Day Year

WORK EXPERIENCE

Describe your work experience during the past four years. Indicate dates of employment for each job and approximate number of hours worked each week. List amounts earned at each job.

Employer/Position	From	To	Hours per Week	Amount Earned
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____

ACTIVITIES, AWARDS AND HONORS

List all school activities in which you have participated during the past four years (e.g. student government, music, sports, etc.). List all community activities in which you have participated without pay during the past four years. Note all special awards, honors and offices held. Indicate whether high school or college activities.

Activity	No. of Years Partic.	Special Awards, Honors	Offices Held
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____

GOALS AND ASPIRATIONS

Make a brief statement or summary of your plans as they relate to your educational and career objectives long-term goals.

Type statement or summary*

LETTERS OF RECOMMENDATIONS

Two letters of recommendation are required. The letters should comment on the student's qualifications for the scholarship and his/her character. Letters can be uploaded below or mailed to the address at the bottom of the form. Your application is not complete until all letters are received by deadline date.

TRANSCRIPT INFORMATION

An transcript of grades must be sent with this application. Transcripts can be uploaded below or mailed to the address at the bottom of the form. Your application is not complete until transcripts are received by deadline date.

CERTIFICATION

The American Educational Scholarship Fund has the sole responsibility for selecting recipients. The application and transcript becomes the property of the American Educational Scholarship Fund.

I acknowledge decisions for the AESF are final. I certify that I meet the basic eligibility requirements of the program as described in the brochure and that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to provide proof of information I have given on this form. Falsification of information may result in termination of any scholarship granted.

Please submit application to:

The American Educational Scholarship Fund, Inc.,
P. O. Box 681
Stone Mountain, GA 30083

Please call 770-235-8772 or email scholarships@aesfcollege.org for additional information.

Acknowledgement *

First Name

Last Name

Date *

Month

Day

Year