

## AREA SCHOLARSHIP APPLICATION

### APPLICANT INFORMATION (IF A BLOCK DOES NOT APPLY PLEASE WRITE "NA" IN THAT BLOCK)

Name:

University or College Where You Are Accepted:

If you have not been accepted yet, date you applied:

Planned College Major:

Name and Location of Current High School:

Graduation Date (must graduate in 2018 to qualify):

Birthdate:

Email:

Phone: (    )

Current street address, APO or MPO:

City:

State:

ZIP Code:

Are you an Active Exchange Associate on the U.S. Payroll?      Yes      No      (Circle One)

Have you been employed for 12 consecutive months?      Yes      No      (Circle One)

If yes, where?

Dates:

**Are you the natural, legally adopted child or custodial stepchild of an active, retired or deceased Exchange U.S. payroll associate or assigned military personnel?      Yes      No      (circle one)**

**I certify that I am a permanent U.S. resident and less than 21 years old.      Yes      No      (circle one)**

**I certify that one or both of my parents meet(s) one of the following requirements:  
Yes      No      (Circle one)**

1. At least 12 months' consecutive Exchange U.S. payroll employment, or for military personnel, 12 month's consecutive Exchange assignment.
2. If a military retiree, retired while on assignment with the Exchange.
3. If deceased, died while on active Exchange employment, or as a retired Exchange associate or military assignee, AND had 12 months' consecutive employment on the U.S. payroll or as a military assignee with the Exchange at time of death.

**Is a parent an active member of AREA?      Yes      No      (circle one)**

Note: Active membership is membership in the national AREA organization, with dues payment current.

### **Provide information about your qualifying parents.**

Name (include military rank if applicable):

Email:

Phone: (    )

Job Title, Exchange Name and Location:

If Retired, Dates of Service:

### **Second Parent If Applicable:**

Name (include military rank if applicable):

Email:

Phone: (    )

Job Title, Exchange Name and Location:

If Retired, Dates of Service:

**AREA SCHOLARSHIP APPLICATION**

**SCHOLASTIC HONORS, OTHER RECOGNITION RECEIVED, SCHOOL ACTIVITY PARTICIPATION, OUTSIDE ACTIVITIES, HOBBIES AND SPECIAL TALENTS. DATES**


**CERTIFICATIONS AND SIGNATURE**

I authorize the verification of the information provided on this form.      Yes      No      (Circle One)  
 I certify that all of it is true and correct.      Yes      No      (Circle One)  
 I have attached Letters of Reference.      Yes      No      (Circle One)  
 I have attached a copy of my most recent academic transcript, including grades.      Yes      No  
 (Circle One)  
 I have attached an essay as required by the instructions for this application.      Yes      No  
 (Circle One)  
 I have attached a copy of my latest SAT/and or ACT scores.      Yes      No      (Circle One).  
 I have attached a current .jpg format photo of me to this email. It will not be returned and will be  
 used for publicity.      Yes      No      (Circle One)  
 I understand that providing all required information and documents is my responsibility, and that  
 AREA is not required to contact me to obtain missing information.      Yes      No      (Circle One)

Signature of applicant:	Date:
Signature of parent/guardian if under 18:	Date: