

## 2010 Scholarship Application Requirements

### I. **APPLICATION CRITERIA:**

- Current full-time or part-time undergraduate or graduate student enrolled in an accredited U.S. college or university
- Currently enrolled in a vocational course
- Newly graduated in High School currently enrolled in an accredited U.S. college or university.
- Demonstrating financial need. Preference will be given to students doing community service for the Filipino American Association of Carson City, Nevada.

### II. **OTHER REQUIREMENTS:**

Parents' membership is required if applicant is under 18 years old. Parent must be a member in 2008 and a valid member before August 1, 2010.

If Applicant turns 18 years of age before the application deadline. Parent must be a member in 2008 and applicant must be a valid member before August 1, 2010.

### III. **DEADLINE DATE FOR SUBMITTING APPLICATION:**

**November 15, 2010**

### IV. **APPLICATION CHECKLIST:**

Applicants are responsible for submitting all materials to the Filipino American Association on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when the FILAM has received all of the following materials:

1. Scholarship Application Form
2. Essay
3. Official copy of most recent transcript
4. Official Verification of current enrollment

### V. **Mail the application with the necessary document(s) to:**

Fil-Am Association of Carson City, Nevada  
Attn: Scholarship Committee  
P.O. Box 4126 Carson City, NV 89702

Successful applicants will be announced at the General Membership Meeting/Summer Picnic in July.



Filipino American Association of  
Carson City, Nevada

1643 Teal Drive Carson City, NV 89701  
[www.fil-am-carsoncity.org](http://www.fil-am-carsoncity.org)

SCHOLARSHIP APPLICATION

I. STUDENT INFORMATION

LAST NAME                      FIRST NAME                      M.I.

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DATE OF BIRTH                      SEX  
\_\_\_\_\_                      [ ] M [ ] F

MAILING ADDRESS                      TELEPHONE NUMBER

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CITY                      STATE                      ZIP CODE

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II. OTHER INFORMATION

RESIDENT OF CARSON CITY, NV                      [ ] YES                      [ ] NO  
PAID MEMBER OF FACCN                      [ ] YES                      [ ] NO  
(For applicants under 18 years of age, parent or guardian information required)

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Last Name                      First Name                      M.I.

STUDENT SIGNATURE                      DATE

*See Reverse Page for Additional Requirements*