# **2019 Scholarship Application**



## **Personal Information**

Name:					-			
Street Address:					-			
City:		State:	Zip:					
Phone Number:								
Email:					-			
Academic Information								
Select current educat	ion level:							
High School Student		Undergraduate Stud	ent	Graduate S	tudent			
Select current enrollment year:								
Freshman	Sophomore	e Junior		Senior				
When do you expect to graduate?								
What is, or will be, your declared major?								
Current Cumulative Grade Point Average (On a 4-point scale):								
Please tell us about your extracurricular activities including any offices held. Also, please list any honors you have received in high school/college. If you need more space, there is an additional blank page at the end of the application.								

### **Employment and Volunteer History**

Please include information for only the last five years. There is space for three different work experiences and there is a blank page at the end of the application if additional info is needed. Employer Name: Employer Address: State: \_\_\_\_\_ Zip: \_\_\_\_ City: Phone: Length of Service: Position Type: Full-time Part-time Volunteer **Duties Performed: Employment and Volunteer History (Cont.)** Name of Employer: Address of Employer: City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Phone:

Length of Service:

Position Type: Full-time	Part-time	Volunteer
Duties Performed:		
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Emplo	yment and V	olunteer History (Cont.)
Name of Employer:		
Address of Employer:		
City:	State:	Zip:
Phone:		
Length of Service:		
Position Type: Full-time	Part-time	Volunteer
Duties Performed:		

### **AGA Membership**

Are you an AGA Member? Yes	No	If yes, chapte	er name:
Do you know any current AGA mem	bers?	Yes No	
If yes, name and relationship to you:			

#### **Checklist and Signature**

Have you submitted the following?

Official transcripts (by mail only): Yes No

Required essay: Yes No

Professional letter of recommendation: Yes No

By typing your name below, you acknowledge that you accept the decision of the Greater Columbus Chapter Committee as final.

Signature of Applicant:	Date
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#### Email application, essay and letter of recommendation to:

Greatercolumbusaga@gmail.com

#### Mail official transcript to:

Greater Columbus AGA Chapter
Attn: Benjamin Thayer
PO Box 13556
Columbus, OH 43213

Only completed applications submitted by April 12<sup>th</sup>, 2019 will be considered.

