

HARRIET IRSA Y SCHOLARSHIP GRANT

offered by

THE AMERICAN INSTITUTE OF POLISH CULTURE
in Miami, FL

Application Form

(Please print using black ink or use a typewriter)

Closing date for submission of ALL required materials – April 20, 2008
Announcement of awards after June 15, 2008

1. Name: Mr. _____
Mrs. _____
Ms. _____

2. Mailing address: _____

Telephone: (_____) _____ - _____

E- Mail: _____

3. Permanent address: _____

Telephone: (_____) _____ - _____

4. Place of birth: _____

5. Date of birth: _____

How did you hear about this scholarship? _____

6. Family background

Father's name: _____

Date of birth: _____ **Place of birth:** _____

Ethnic background: _____

Occupation: _____

Present address: _____

Telephone: (____) _____ - _____

Mother's name: _____

Date of birth: _____ **Place of birth:** _____

Ethnic background: _____

Occupation: _____

Present address: _____

Telephone: (____) _____ - _____

7. Present citizenship: _____

If you are a permanent resident of the US please include a copy of your green card.

8. Name of the school in which you are currently enrolled _____

I am in my freshman sophomore junior senior year

What is your present major? _____

What is your intended major? _____

What fellowships or financial grants do you presently hold, if any?

9. How much financial aid do you expect to receive for the academic year? Please list all of the grants, scholarships, loans and other support you are applying for:

10. How much financial aid will you receive monthly from your parents?

11. List honors and distinctions you have achieved as a student. (Use additional paper if necessary) _____

12. Have you had any articles, theses or books published? If so, please indicate their titles, place and date of publication. (Use additional paper if necessary)

13. How would you rate your knowledge of Polish language?

- None Poor Fair Good Excellent

14. What have been your interests and activities outside your schoolwork or professional activities? (Use additional paper if necessary)

15. List three (3) professors under whom you have studied or three (3) authorities in your field who can attest to your academic or professional ability, or three (3) teachers with whom you have studied from whom you will request letters of recommendation, to be sent by the teachers, directly to the Institute. These letters must be original, signed, and on letterhead paper.

Name: _____

Title or position: _____

Address: _____

Telephone: (_____) _____ - _____

Name: _____

Title or position: _____

Address: _____

Telephone: (_____) _____ - _____

Name: _____

Title or position: _____

Address: _____

Telephone: (_____) _____ - _____

18. In addition to the required letters of recommendation (which must be signed originals, on letterhead and sent directly to the Institute) you must ask your school to mail the official transcript to the Institute. If not presently enrolled in any school, send transcript from the last school, which you attended. Absolutely NO copies of any documents will be accepted. Please inform those people sending documents of this requirement.

Date

Signature