

\$268,500
IN SCHOLARSHIPS WILL BE AWARDED TO MEMBERS OF

First **Catholic** Slovak
Ladies **Association**
24950 Chagrin Blvd., Cleveland, Ohio 44122 • 1-800-464-4642 www.fcsla.org

HIGH SCHOOL
2019 SCHOLARSHIP APPLICATION

RULES OF ELIGIBILITY

1. An eligible candidate for a First Catholic Slovak Ladies Association Fraternal Scholarship Award must meet the following qualifications:
 - a. A member of good standing with the Association for at least **three years** prior to date of application and hold **one of the following policies in his or her own name**: a \$1,000 minimum permanent life insurance certificate; a \$5,000 minimum term certificate; or an annuity certificate (minimum amount not required). Such membership standing shall be verified from the records of the Home Office.
 - b. **Select a private or Catholic accredited high school in the United States** and be in a program leading to a High School diploma.
 - c. Applicants are eligible to win **once** in **each** of the 5 categories: Early elementary school (grades 1-4); older elementary school (grades 5-8); high school; college; and as a graduate student.
 - d. **The Award must be used toward tuition for the 2019-2020 academic year.** If a student received **full** tuition funding from a governmental or other source, she/he will **not** be eligible to receive an FCCLA Scholarship Award.
2. Application Requirements:
 - a. Submit a written essay of approximately 250 words on **“What This High School Scholarship Will Do For Me”** and a **wallet-sized picture**. Include any school or civic activities and/or volunteer work in which you participated. Please describe any demonstrated leadership skills.
 - b. **For High School Freshmen candidates:** Submit an **official** transcript of the current school year's grades. Previous school year's grades are also acceptable. Submit a copy of the acceptance letter from the high school named in this application.
 - c. **For all other high school candidates:** Submit an **official** transcript of the applicant's high school record for the current school year.
 - d. **All applications and supporting paperwork must be received at the Home Office no later than 4:30 p.m. EST on Tuesday, February 26, 2019.** Applications received after this date and time will not be considered. Materials submitted in support of the application will not be returned. Application and supporting materials may be submitted as an e-mail attachment (PDF file) or fax. Our e-mail address is scholarship@FCSLA.org; our fax number is (216) 464-9260 (Attn: Scholarship Dept.).
3. The final decision will be made by an outside committee in the education field. Winners will be notified by letter. Names of winners will be published in the August issue of "Fraternally Yours". The Award check will be issued in the name of the high school and the name of the winning student.

4. There are thirty-six (36) High School Fraternal Scholarship Awards at \$1,000 each given as follows:

9 for freshman 9 for juniors
9 for sophomores 9 for seniors

5. Send completed application and address all communications to:

First Catholic Slovak Ladies Association
ATTN: Scholarship Dept.
24950 Chagrin Blvd.
Beachwood, OH 44122

Phone: (216) 464-8015 Ext. 1054 or (800) 464-4642 Ext. 1054

E-mail: Scholarship@fcsla.org

FIRST CATHOLIC SLOVAK LADIES ASSOCIATION
TERMS OF AWARD

1. In the event that a scholarship recipient in any of the groups decides to withdraw, the Award must be returned to the First Catholic Slovak Ladies Association Fraternal Scholarship Fund.
2. The recipient shall observe all regulations of the educational institution, including—without limitations--those regarding residence and discipline satisfactory to the college, university, high school or elementary school.
3. No suspension of tenure permitting the recipient to be absent from school and return to it later shall be allowed, except with the approval of the First Catholic Slovak Ladies Association and the educational institution.
4. The Board of Directors of the First Catholic Slovak Ladies Association reserves the right to withdraw and cancel the Fraternal Scholarship if, in the judgment of the Board and of the college, university, high school or elementary school, the recipient is no longer eligible to hold the scholarship.
5. Any member studying for the Catholic priesthood or religious life is eligible to receive two (2) scholarships if qualified and approved, and if the necessary supporting documents are submitted.

I hereby apply for a First Catholic Slovak Ladies Association Fraternal Scholarship Award for the academic year beginning:

_____ 20_____ as a _____
 Freshman, Sophomore, Junior or Senior

At _____
 (Name and address of high school selected)

For the purpose of establishing my eligibility for a scholarship award, I submit the following information which I represent to be true and complete. I have read in entirety the Rules of Eligibility and Terms of Award and I hereby accept and agree to said Rules and Terms.

(print or type)

Full name: _____

Home address: _____
 (street) (city) (state) (zip)

Social Security #: _____ Email: _____

Date of Birth: _____ Telephone: _____

Father's Name: _____ Mother's Maiden Name: _____

Have you ever received an FCSLA Fraternal Scholarship Award? _____ Category? _____ Amount? _____

Applicant's School Information

	Name and Location of School	Dates of Attendance	Date of Graduation
Elementary			
High School			

Application for scholarship and supporting paperwork should be mailed to:

First Catholic Slovak Ladies Association
 ATTN: Scholarship Department
 24950 Chagrin Blvd.
 Beachwood, Ohio 44122

Application and supporting documents must be RECEIVED at the Home Office no later than 4:30 p.m. EST on Tuesday, February 26, 2019.

References

Names and addresses of Principal, counselors or instructors who have specific knowledge of applicant's academic qualifications:

Select One: *(Your choice does not affect eligibility)*

____ I am attaching my photograph. If selected as a scholarship recipient, I would like it to be included in the FCSLA publication announcing this year's winners.

____ I elect not to include a photograph of myself. If selected as a scholarship recipient, no photo will be included in the FCSLA publication announcing this year's winners.

How many of your family are members of the First Catholic Slovak Ladies Association? _____

One of the conditions for approval of this application is the accuracy and completeness of the information supplied herein and in any attached supporting documents. I hereby consent to the filing of the application and accept the Rules of Eligibility and Terms of Award.

Date

Signature of parent or guardian

Signature of applicant

Mailing address of parent or guardian if different

Mailing address of applicant

E-mail address of parent or guardian

TO BE COMPLETED AT HOME OFFICE

The Home Office records show the above named member is in good standing under:

Certificate No.	Date Issued	Amount	Plan

Date of Membership _____

Verified by _____