$248,250
IN SCHOLARSHIPS WILL BE AWARDED TO MEMBERS

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

SEMINARY, DIACONATE OR RELIGIOUS LIFE 2015 SCHOLARSHIP APPLICATION

RULES OF ELIGIBILITY

1. An eligible applicant 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 a $100 minimum annuity certificate. Such membership standing shall be verified from the records of the Home Office.

   b. Select an accredited college or university in the United States, and be enrolled **full-time** in a program leading to an associate's or bachelor's degree or to include post-graduate work leading to at least an associate's degree.

   c. Applicants are eligible to win **once** in **each** of the 5 categories: Early elementary school student, grades 1-4; older elementary school student, grades 5-8; high school student; college student; and graduate student.

   d. **The Award must be used toward tuition for the 2015-2016 academic year.** If the recipient receives **full** tuition funding from a governmental or other source, she/he will **not** be eligible to receive an FCSLA Award.

2. Application requirements:

   a. Submit an **official** transcript of the applicant's college or university record for the current school year. Applicants can also have his or her school send an official copy via postal mail or e-mail on his or her behalf – please indicate this on the application.

   b. Submit an autobiographical statement of approximately 500 words of the applicant's **goals and objectives**. Please include any church, school, branch or community activities and/or volunteer work. Please describe any demonstrated leadership skills.

   c. A wallet-sized picture.

   d. **All applications and supporting paperwork must be received by the Home Office no later than Friday, February 20, 2015**. Applications received after this date will not be considered. Materials submitted in support of the application will not be returned.

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 checks will be issued in the name of the college or university and the name of the winning student.

4. Send the completed application and all required documents to:

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

To contact the Scholarship Department:
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 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.

First **Catholic** Slovak Ladies **Association**

24950 Chagrin Blvd.
Beachwood, Ohio 44122

SEMINARY, DIACONATE OR RELIGIOUS LIFE Fraternal Scholarship Application

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

_____ 20_____ as a _____
Seminarian, Diaconate or Religious Life

At _____
(Name and address of college 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: _____ Occupation: _____

Mother's Maiden Name: _____ Occupation: _____

How many family dependents? _____

Mention any financial circumstances which may place a heavy burden on your family: _____

_____

_____

_____

_____

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

List all financial assistance including: Federal, State, Private, College or University Foundation: _____

_____

_____

Application for scholarship and supporting paperwork should be mailed to:

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

Application and supporting documents must be RECEIVED at the Home Office no later than Friday, February 20, 2015.

Applicant's School Information

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

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 aforesaid Rules of Eligibility and Terms of Award which were hereto annexed.

_____ _____

Signature of applicant Date

_____

Mailing address of applicant

TO BE COMPLETED AT HOME OFFICE

Certificate No.	Date Issued	Amount	Plan

Date of Membership _____ Verified by_____