

VOCATIONAL/TRADE/TECHNICAL SCHOOL 2020 SCHOLARSHIP APPLICATION

RULES OF ELIGIBILITY

1. An eligible applicant for this scholarship award might be planning to attend a community college, vocational school, trade school or other short-term training program in fields such as automotive technology, plumbing, heating, construction, welding, advanced manufacturing, cosmetology, computer repair, etc. and 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; an annuity certificate. Such membership standing shall be verified from the records of the Home Office.

Members from the **Polish Union of North America (PUNA)** will not meet the 3-year membership requirement until June 1, 2020 and are therefore not eligible for the 2020 FCSLA scholarship program.

- b. Enrolled in or entering an accredited vocational or technical program in the United States. Applicant must be enrolled or planning to enroll within 6 months of the application deadline, for a minimum of **12 credit hours** in a program leading to a certificate, diploma or associate's degree.
- c. Students currently enrolled in a Bachelor's or other advanced degree programs are not eligible.
- d. Applicant must have a high school diploma or Graduate Equivalent Degree (GED) without a bachelor's or advanced degree.
- e. Applicants are eligible to win only **once** in this award category.
- f. **The Award must be used toward tuition for the 2020-2021 academic year.** Half of the award in the Fall and the other half in the Spring semesters. If the applicant/recipient receives **full** tuition funding from a governmental or other source, she/he will **not** be eligible to receive an FCSLA Award.

Members from Polish Women's Alliance of America

Members from the Polish Women's Alliance of America (PWAA) are not eligible for FCSLA scholarships at this time. Members from PWAA should contact the Scholarship Department at Scholarship@fcsla.org or call 1-800-464-4642 ext. 1054 for additional PWAA scholarship information.

2. Application requirements:
 - a. **Submit an official transcript** of the student's high school or college grades. Applicants can also have his or her school send an official copy on his or her behalf – please indicate on the application.
 - b. Submit a letter of recommendation - not from a family member.
 - c. **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 you have done. Describe any demonstrated leadership skills.

- d. Include a **wallet-sized photo**. It must be an actual photo, a photo printed on photo paper or a .jpeg attachment to an e-mail when submitting electronically.
 - e. **All applications and supporting documents must be POSTMARKED or electronically received no later than Tuesday, February 25, 2020.** Applications postmarked or electronically received after this date will not be considered. Materials submitted in support of the application will not be returned. Application and supporting documents may be submitted electronically 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.).
 - f. A letterhead copy of the document of acceptance to the school name in this application must be received by the Scholarship Department before payment will be made.
3. Five (5) \$1,250 Vocational -Trade -Technical School Scholarships will be awarded, depending on the number of eligible applicants.
 4. The final decision will be made by an outside committee in the education field (Judging Committee). **Winners will be notified by letter the 2nd week of May, 2020.** Names of winners will be published in the August issue of "Fraternally Yours." Award checks will be issued on or about July 1st in the name of the technical school or college and the name of the winning student.
 5. Send the completed application and all required documents to:

First Catholic Slovak Ladies Association
ATTN: Scholarship Dept.
24950 Chagrin Blvd.
Beachwood, OH 44122
E-mail: Scholarship@fcsla.org
Fax: (216) 464-9260

To contact the Scholarship Department:
Phone: (216) 464-8015 Ext. 1054 or (800) 464-4642 Ext. 1054

FIRST CATHOLIC SLOVAK LADIES ASSOCIATION TERMS OF AWARD

1. The award must be used for tuition for the academic year(s) for which it was awarded.
2. 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.
3. The recipient shall observe all regulations of the educational institution, including—without limitations--those regarding residence and discipline satisfactory to the vocational, trade, technical school or college.
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 all requirements are fulfilled.

Home Office Use

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.

APPLICANT'S PERSONAL INFORMATION (please 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? (circle one) Y N

If yes, enter: Year _____ Category _____ Amount _____

Are you attending classes full-time (12 or more credit hours)? (circle one) Y N

If appropriate, will this qualify you for a license? (circle one) Y N

- Please check all that apply:
- _____ (1.) My official transcripts are enclosed
 - _____ (2.) I will mail my official transcripts separately to FCSLA
 - _____ (3.) Letter of acceptance is pending; I will mail to FCSLA upon receipt
 - _____ (4.) My school will mail my official transcripts directly to FCSLA
 - _____ (5.) My school will mail my letter of acceptance directly to FCSLA

Select One: (Your choice does not affect eligibility)

_____ I am attaching my photograph (actual photo, a photo printed on photo paper or a .jpeg attachment to an e-mail). 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 in your family are members of the First Catholic Slovak Ladies Association? _____

Applications and supporting documents must be POSTMARKED or electronically received no later than Tuesday, February 25, 2020.

Application for scholarship and supporting documents should be sent to:

First Catholic Slovak Ladies Association

ATTN: Scholarship Dept.

24950 Chagrin Blvd.

Beachwood, Ohio 44122

E-mail: Scholarship@fcsla.org

Fax: (216) 464-9260

I certify that the information on this form and the supporting documents are true and complete to the best of my knowledge. I understand that the information will be considered confidential, for review by the Judging Committee. I consent to the filling of the application and accept the Rule of Eligibility and Terms of Award.

Date

Signature of applicant

Signature of parent or guardian if under age 18

Printed Name

Mailing address of parent or guardian if different

TO BE COMPLETED AT HOME OFFICE

Certificate No.	Date Issued	Amount	Plan

Date of Membership _____

Verified by _____

First **Catholic** Slovak
Ladies **Association**
24950 Chagrin Blvd.
Beachwood, Ohio 44122

TO BE COMPLETED BY JUDGING COMMITTEE:

Category	Max Score	Actual Score
Academic Standing	40	
Church/Community Value	30	
School Involvement/Essay	30	
Total Points (must not exceed 100 pts)	100	

2020 VOCATIONAL/TRADE/TECHNICAL School Scholarship Application

Student's FIRST NAME ONLY: _____

I am applying for a First Catholic Slovak Ladies Association Fraternal Scholarship Award for the academic period beginning year 20_____

With the intent of receiving a/an (circle one): Certificate Diploma Degree Certification Other

Name and address of school, college or university selected _____

Check here if you are currently undecided.

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 advisors who have specific knowledge of applicant's academic qualifications:
