



*Artisans Order of Mutual Protection
8100 Roosevelt Boulevard
Philadelphia, PA 19152*

*Application for
\$1,000 College Scholarship Assistance Award
Must be returned no later than March 31st*

"Meet the Challenges of a Higher Education"

PLEASE PRINT OR TYPEWRITE

Name of Student _____

Address _____

_____ Telephone No. _____

Assembly to which you belong _____

Name of High School _____ Graduation Date _____

High School Address _____

Have you applied to a College or University for acceptance in Fall '12? _____

Have you been accepted for admission by one or more Colleges or Universities? _____

If you have been accepted, please complete the following:

First Choice _____ Anticipated Cost* _____

Address _____

Second Choice _____ Anticipated Cost* _____

Address _____

*Please list your total cost of tuition and room and board.

Have you received any other scholarships or grants? _____

Please indicate total family income: _____ Other dependent children? _____

Do you have a part-time job? _____

Approximate earning _____ Signature _____

On a separate sheet of paper, please give a brief description of any special family circumstances that will help us reach a decision on your application. We would also like a brief resume of your school years activities and any other aspirations you may have for your future career plans.



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THIS PORTION OF THE APPLICATION MUST BE COMPLETED BY YOUR HIGH SCHOOL GUIDANCE COUNSELOR AND RETURNED TO THE MAIN OFFICE TO:

Mr. George J. Listner, Most Excellent Recorder
Artisans Order of Mutual Protection
8100 Roosevelt Boulevard
Philadelphia, PA 19152

Name of Student _____

Name of High School _____ Phone _____

School Address _____

Student's Overall Grade Average _____ PSAT Scores - Verbal _____

Sophomore _____ Math _____

Junior _____ SAT Scores - Verbal _____

Senior _____ Math _____

Most recent Class Rank _____

PLEASE ATTACH SCHOOL TRANSCRIPT

On the reverse side of this form, please list any additional information which you feel will help us to understand the student's background and your recommendation for College. Please indicate activities, sports, clubs, offices, honors, or any special achievements.

Signature _____

ALL INFORMATION MUST BE COMPLETE IN ORDER FOR THE STUDENT TO BE ELIGIBLE FOR CONSIDERATION OF A SCHOLARSHIP.