## **INSTRUCTIONS:**

Please complete this form and return to the address at the bottom of this application no later than **July 1** annually. To be considered you must submit all required information by this date.

## **BIOGRAPHICAL INFORMATION** NAME: (First) \_\_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_ DOB: \_\_\_\_\_ GENDER: \_\_\_\_ ADDRESS: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_ PARENT EMPLOYED BY: ICE or CBP (SELECT ONE) NAME OF PARENT: TELEPHONE: POSITION: DUTY STATION: COLLEGE TO BE ATTENDED: \_\_\_\_\_ LOCATION: \_\_\_\_ ANTICIPATED COLLEGE GRADUATION DATE: \_\_\_\_\_ EDUCATIONAL BACKGROUND HIGH SCHOOL: LOCATION: \_\_\_\_ DATE OF HIGH SCHOOL GRADUATION: \_\_\_\_\_ HIGH SCHOOL CUMULATIVE GPA: \_\_\_\_\_ On a scale of: \_\_\_\_\_ RANK IN CLASS (if applicable): \_\_\_\_\_ Out of how many? \_\_\_\_\_ SAT Results: CR \_\_\_\_\_ M \_\_\_\_ W \_\_\_\_ TOTAL: \_\_\_\_ and/or ACT: \_\_\_\_\_ HONORS/AWARDS: (PLEASE be specific—do not state "refer to resume")

**ACTIVITIES/SPORTS HONORS** 

**ACADEMIC HONORS** 

SPECIAL CONSIDERATION (can include some of the following: death of a student's parent or guardian; disability of student; other unusual expenses or circumstances)

## PROFESSIONAL ASPIRATIONS AND PERSONAL STATEMENT:

(This professional aspirations/personal statement is to be included on a separate sheet of paper with this application – please limit your response to one page.)

Provide a brief statement of your educational and career goals and experiences, as well as your professional aspirations. Indicate in which area(s) of study you are considering making your career, and specify how your current academic program and your overall educational plans will assist you in achieving your goal.

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Checklist: Did you include or arrange for the following?

- A. Scholarship application.
- B. Signed letter of recommendation on letterhead from a high school teacher, guidance counselor, principal or vice-principal, clergyperson, or employer. Letters that are unsigned and/or not on letterhead will NOT be accepted.
- C. A complete, final, official, school-issued high school transcript of grades. If for some reason this is not available (as in the case of a three-year graduation program), submit a letter of explanation. Unofficial transcripts and/or transcripts that do not include final senior-year grades will NOT be accepted.
- D. A copy of your diploma/graduation certificate and indication of class rank.
- E. A copy of an acceptance letter from an approved college or university.
- F. A copy of your scores on the SAT. If this test is not given in your area, provide the scores from the comparable test that is given. Other scholastic aptitude test results may be submitted at the discretion of the applicant.
- G. A personal statement.
- H. A stamped, self-addressed envelope.

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Please mail completed form along with other required information to:

Roger L. Von Amelunxen Foundation

P.O. Box 660159

Fresh Meadows, NY 11366

You may send application via certified mail, but this is not required. If you wish acknowledgement of our receipt of your complete application, please enclose a stamped, self-addressed postcard.

## NO FAXES OR ELECTRONIC SUBMISSIONS ACCEPTED

APPLICATIONS RECEIVED AFTER JULY 1 WILL NOT BE ACCEPTED.

FINAL, COMPLETE, OFFICIAL TRANSCRIPTS AND DIPLOMAS

MUST ARRIVE NO LATER THAN JULY 15.