

# Palama Scholarship Foundation

## Application for scholarship

**Name:** \_\_\_\_\_ **Date of birth:** \_\_\_\_\_  
First Middle Last MM/DD/YYYY

**Current mailing address:** \_\_\_\_\_  
Street City State Zip

**Phone:** ( ) \_\_\_\_\_ **Email address:** \_\_\_\_\_ **Gender :** M ( ) F ( )

**Status in U.S:** U.S. Citizen ( ) Permanent residence ( ) Other: \_\_\_\_\_ **Place of Birth:** \_\_\_\_\_

### Name and address of the school attending 2020-21

\_\_\_\_\_  
Name Address

**Level during scholarship year:** Freshman ( ) Junior ( ) Sophomore ( ) Senior ( ) Other:

**Major:** \_\_\_\_\_ **Degree:** \_\_\_\_\_ **Expected graduation date:** \_\_\_\_\_

**GPA:** \_\_\_\_\_ **SAT score (Freshmen only) :** \_\_\_\_\_

### Education History

Name of School	City & State	Dates of attendance

### Extra curricular activities

#### 1. Community service / Volunteer work

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### 2. Organization activities

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Skills and hobbies**

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**Other information you would like to share with committee**

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**I certify that to the best of my knowledge and belief, the information contained in this application is true and correct. I grant permission to use applicant's name, photo, and other relevant information for publishing to promote Palama Scholarship Foundation.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Sign

\_\_\_\_\_  
Date

For Office Use Only
<p><b>Date received :</b></p> <p><b>Via:</b> Mail ( ) Drop off ( )</p> <p style="padding-left: 100px;">- Kalihi ( ) Makaloa ( ) Waimalu ( )</p> <p><b>Reviewed by :</b></p> <p><b>Supporting document:</b> Proof of enrollment ( ) Financial Information ( ) Transcript ( ) Personal Statement ( )</p>