



Kona Japanese Civic Association

Heritage • Culture • Diversity

SCHOLARSHIP APPLICATION

NAME: _____

MAILING ADDRESS: _____

PHONE NO. _____ EMAIL: _____

NAME, ADDRESS AND PHONE NO. OF PARENT(S), LEGAL GUARDIAN

LIST OTHER DEPENDENTS, IF ANY (NAME, AGE, AND RELATIONSHIP)

SCHOOL PRESENTLY ATTENDING: _____

FAFSA EXPECTED FAMILY CONTRIBUTION (EFC): (Required) _____

CURRENT GRADE LEVEL: _____ CURRENT GRADE POINT AVERAGE: _____

SCHOOL WHICH YOU EXPECT TO ATTEND: _____

EXPECTED DATE OF ENTRY: _____ DEGREE EXPECTED: _____

CAREER PLANS: _____
(FIELD OF STUDY/EMPLOYMENT)

TELL US ABOUT YOURSELF (INTERESTS, EXTRACURRICULAR, COMMUNITY SERVICE/
VOLUNTEERISM)
