



ORDER OF AHEPA
THOMAS A. EDISON
CHAPTER 287
ASBURY PARK/OCEAN TWP NEW JERSEY

2010 AHEPA SCHOLARSHIP APPLICATION

Personal data

Family Name _____ First _____ Middle _____

Permanent Address: Number and Street _____

City or Town _____ State _____ Zip Code +4 _____

Permanent home telephone _____

E-Mail Address: _____ Cell Phone: _____

Date of Birth _____ Place of Birth: City _____ State _____ Country _____

Citizenship (check as appropriate): U.S. citizen: U.S. Permanent Resident Alien:

Citizen of _____ Other specify country: _____

Are you or anyone in your family an active member of the AHEPA Family? Yes ____ No ____.

Identify any AHEPA affiliation (all that apply): Father _____ Mother _____ Yourself _____

Anyone else related to you: _____

Educational data

Name of academic institution you will be attending for fall of 2010:

Institutions Name _____

Address _____

City _____ State _____ Zip code _____

Area(s) of academic concentration /major: _____

Career or professional goals: _____

Test Information

A. HIGH SCHOOL SENIORS

The official scores from the appropriate testing agency must be submitted with the official transcript from your school

SAT I (or SAT) Date(s) Taken: _____ verbal _____ math _____ writing _____

Total Score: (out of 2,400) _____

ACT: Date(s) Taken: _____

English _____

Math _____

Reading _____

Science _____

Composite (out of 36) _____

B. HIGH SCHOOL GRADE POINT AVERAGE (GPA) THROUGH DECEMBER 2009 (INELIGIBLE IF NOT COMPLETED)

GPA _____ Maximum GPA 4.0 scale

Academic Honors

Please list all the academic honors which you have received and by whom they were awarded.

Honor's won:

Letter's earned:

Extracurricular, school activities and volunteer community activities (including summer)

Please list and describe your principal extracurricular, community, and volunteer social activities i.e. clubs, societies, sports, etc.

Greek Orthodox Church Youth Activities

Please list your participation in any church activities during the past three years, what you did and the duration of your participation.

Write a paragraph explaining why you merit this scholarship award (Attach typed document).

Name and age of other children in your family attending School or College and the School they attend:

Applicant's Signature

Parent/Guardian Name in Full

*Please attach transcript(s) SAT Scores to this application. This application and all other documents shall be completed and returned or mailed to the St George Greek Orthodox Church office:

ST. GEORGE GREEK ORTHODOX CHURCH
700 GRAND AVENUE
ASBURY PARK, NJ 07712

***IMPORTANT: ALL APPLICATION ARE TO BE RECEIVED IN THE OFFICE CHURCH NO LATER THAN JUNE 10 2010**