

SCHOLARSHIP / GRANT APPLICATION

GENERAL INFORMATION

First Name			
Last Name			
Address 1			
Address 2			
City			
State			
Zip Code			
Phone Number			
Email Address			
Date of Birth (mm/dd/yyyy)	//		
Are you a U.S. citizen?	Yes No If no, of what country are you citizen?		
How did you hear about us?			
FUNDING			
What is the full amount you are What is the reason you are app	\$		
Have you applied for funds fror	n this foundation before?	🗆 Yes 🗌 No	
If yes, when (mm/dd/yyyy)? Are you funded in any other way?		/ □ Yes □ No	
			If yes, please list sources and a

EDUCATION

School you are now attending (or last attended):				
School you plan to attend:				
Address:				
Field of study:	Degree Anticipation:			
Career plans after school:				

Please list by academic year (if applicable):

FRESHMAN	SOPHOMORE	JUNIOR	SENIOR	
Extracurricular School Activities (athletics, organizations, clubs, plays, etc.)				
Work experience (list any significant work experience in the last two years)				
Community / Campus Involvement (volunteer work, charity work, leadership roles, etc.)				

FAMILY

	FATHER	MOTHER
Name		
Employer (Name and Address)		

Please comment on the extent to which you need financial assistance. Please list all scholarships for which you have applied, and scholarships you have been awarded and the amounts.

Briefly (75 words or less) discuss your personal achievements and / or goals that you have reached the last four years which holds significant value to you and why.

ADDITIONAL INFORMATION

Please include any additional information which you feel may help you demonstrate need or qualifications, for example, high school letters of reference, essays, SAT score, Common Core Reports, photographs, etc.

PLEASE RETURN TO:

Danish American Language Foundation c/o Lea Olesen, Secretary 872 S. Milwaukee Ave. Ste 148 Libertyville, IL 60048

> Phone: 732-762-4253 Email: <u>leao@dalf.us</u>

Application Deadline is February 28.