2016
NAIFA Blue Mountain
National Association of Insurance and Financial Advisors
SCHOLARSHIP APPLICATION

NAME:

_____

First M.I. Last

AGE: _____

MAILING ADDRESS:

_____

_____

EMAIL: _____

HOME PHONE: _____ Cell Phone _____

SCHOOL PHONE: _____

SCHOOL: _____

COUNSELOR: _____

CURRENT G.P.A.: _____

HIGH SCHOOL GRADUATION DATE: _____

PARENT/GUARDIAN NAME: _____

ADDRESS: _____

PHONE: _____

WHAT COLLEGE DO YOU PLAN TO ATTEND FOR THE 2016-2017 SCHOOL YEAR?

_____

TENTATIVE COLLEGE MAJOR: _____

Please attach:

1) Letter outlining your career goals and the reasons you should be considered for this scholarship.
2) List of activities, hobbies, honors, awards and work experience.
3) Current high school or college transcript.

Thank you!