

The Angus Robinson Jr. Memorial Foundation

Scholarship Application

Student Name: _____ SS #: _____ - _____ - _____

Permanent Address: _____

Telephone Number: _____ Date of Birth: _____

Email: _____

Name of College: _____

Degree & Major: _____ Completion Date: _____

Please complete the following questions:

1. Will you be enrolled as a full-time student during the 2008/2009 academic year?

Yes _____ No _____

2. Are you a citizen of the U.S.? Yes _____ No _____

If No, are you a legal resident? Yes _____ No _____

3. What are your work plans or activities during the academic year? (e.g. part-time work, volunteer activities etc.). Give details:

Student's Statement of Candidacy

I authorize the Angus Robinson, Jr. Memorial Foundation use of the above information about my background for publicity purposes should I be selected for a scholarship. I also authorize the Financial Aid Office to release information concerning by academic and financial history.

Student Signature: _____ Date: _____