Application for Scholarship Funding from

The Nathan L. Anderson Memorial Scholarship Foundation, Inc.



APPLICANT INFORMATION

YOUR BIOGRAPHICAL INFORMATION:

Name (first, middle, last):		
Date of Birth (mm/dd/yy):		
Mailing Address: Street		Apt./Suite
City	State	Zip Code
Phone: ()	Email	
Are you a U.S. Citizen or permanentYes	•	tus will be required, if selected.)
describe yourself, your goals, your a	mbitions, and how the	for whom this Foundation is named. Briefly se are compatible with the Foundation's Focus ages, to complete the essay required by this

YOUR ACADEMIC BACKGROUND/INFORMATION:

Primary/Elementary School(s):				
Secondary/High School(s):				
College(s)/University(s):				
Academic Year for which you are applying? Which Semester?				
Your college academic status at the beginning of the term of this scholarship award:				
Freshman Sophomore Junior Senior				
Most recent Grade Point Average (GPA): Cumulative GPA: Hours completed:				
Hours needed to complete degree: Anticipated Graduation Date:				
Bachelor's Degree being pursued:				
Computer Science: Aviation: Music: Nursing:				
Name/Address of College/University you attend/plan to attend:				

Additional Information:

- (1) The application cycle opens on May 15th and closes on July 15th each calendar year. (Please do not submit material before May 15th.)
- (2) Attach two (2) letters of recommendation from educators who are your current or prior instructors.
- (3) The application form and attachments should be completed and submitted either via:
 - a. Scan all documents and email the scanned packet to:
 - i. gerald@rememberingnathananderson.org, or
 - ii. ruby@rememberingnathanderson.org

OR

- b. Mail packet to: The Nathan L. Anderson Memorial Scholarship Foundation, Inc., 4403 Knott Street. Beltsville, MD 20705. Attention: Application Review Committee
- (4) All documents must be <u>received</u> no later than July 15th. There are no exceptions for late submissions.
- (5) Review of applications and award decisions are done during the week that follows July 15th.

APPLICANT CERTIFICATION:

I certify that the above information is true, complete, and accurate to the best of my knowledge, and does not omit any material fact would render the statement false, fictitious, or fraudulent as a result of the omission. I understand that if I am chosen as a recipient of the award, I will be required to abide by the terms and conditions of the scholarship. I also agree to immediately inform the Scholarship Foundation if I change my declared major course of study.

SIGNATURE OF APPLICANT	DATE