ALLEN J. FINKELSON SCHOLARSHIP APPLICATION FORM

APPLICATION: Deadline: May 29, 2017

*Recipients may reapply annually for a maximum of four years.

ACADEMIC SCHOLARSHIP PERSONAL INFORMATION:

Name_____________________________________________________

Address____________________________________________________

City/State/Zip________________________________________________

Telephone ___________________________

E-Mail ___________________________________

Date of Birth _________________________ Gender (M or F ________)

Current Year in School _______________________ GPA________________

If you are a high school senior, have you been accepted to an accredited college or university? (Yes __) (No __) If “Yes” to above, what is the name of the college or university?

______________________________________________

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What is your current or planned major?

_____________________________________________

What are your career objectives?

___________________________________________________

FAMILY INFORMATION:

Father’s Name _______________________________________

Address ____________________________________________

City/State/Zip ______________________________________

Telephone ______________________________

E-Mail ____________________________________________

Occupation/Employer __________________________________________

Mother’s Name _______________________________________

Address ____________________________________________

City/State/Zip ______________________________________

Telephone ______________________________

E-Mail ____________________________________________

Occupation/Employer __________________________________________

Number of Siblings _______ Ages of Siblings____________________

Are any siblings in college or graduate school? ___ How many? ___

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EDUCATIONAL INFORMATION:

List all schools you have attended beginning with the current one and working backward:

SCHOOL, LOCATION & DATES ATTENDED

____________________________________________________

____________________________________________________

____________________________________________________

____________________________________________________

Grade Point Average (GPA) for the past two years

Scholastic Honors

____________________________________________________

____________________________________________________

____________________________________________________

Extracurricular Activities at School

____________________________________________________

____________________________________________________

____________________________________________________

ACTIVITIES / INTERESTS:

Community Involvement Service

____________________________________________________

____________________________________________________

____________________________________________________

Special Interests

____________________________________________________

____________________________________________________

____________________________________________________

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Involvement with Journalism, Communications or Horses
________________________________________________________
________________________________________________________
________________________________________________________

WORK EXPERIENCE:
List employment you have held beginning with the most recent:

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<th>EMPLOYER</th>
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FINANCIAL: Estimate your college expenses for the coming year:
Tuition ____________ Room/Board ________________
Books/Supplies __________ Transportation ______________
Miscellaneous Fees __________________________

Estimate your financial resources to cover these expenses:
Parents ____________
Your Earnings/Scholarships ________
Loans _________________ Financial Aid ______________________
Government Grants ________ Other ________________________

ESSAY: On a separate sheet, write an essay of no more than 1,000 words describing yourself. Please include your interests, academic career, past and future course of study and, most importantly, why you deserve consideration for a scholarship award. Please enclose your essay with this application.
LETTERS OF RECOMMENDATION: Along with your application, you must submit at least two letters of recommendation from a teacher/professor, employer and/or community official. Letters from relatives will not be considered. If these letters are mailed separately, please be sure they are postmarked before the deadline. List below the names and job titles of persons you have asked to write letters on your behalf:

__________________________________________________________

__________________________________________________________

__________________________________________________________

ALL APPLICATIONS MUST BE COMPLETED IN FULL, MUST BE POSTMARKED NO LATER THAN MAY 29, 2017 AND MUST BE ACCOMPANIED BY A CURRENT OFFICIAL SCHOOL TRANSCRIPT. MAIL TO: Florida Chapter USHWA, Scholarship Committee, 3508 Sahara Springs Blvd., Pompano Beach, FL 33069 phone: 954-415-6369.