AAADAC SCHOLARSHIP
FALL WORKSHOP 2016

REMIT TO:
AAADAC
P.O. BOX 45386
LITTLE ROCK, AR 72214

Name: _____ Title: _____

Organization: _____ Phone: _____

Address: _____

City: _____State: _____ Zip: _____

Number of wage earners in home: _____

Number of dependents: _____

Have you ever received an AAADAC scholarship? Y N

Please write a narrative explaining why you are requesting a scholarship. Describe specific financial need or any other associated hardships. Those demonstrating the greatest need will be considered as the recipients. Attach any documentation relevant to the application. Use this space only to respond.

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