

## YORUBA CLUB OF ARIZONA

501(c)(3) Non-profit Organization
P. O. Box 1085, Peoria, Az 85380
info@yorubaclubofarizona | www.yorubaclubofarizona.org

### YCA Scholarship Awards Application Form

#### **Purpose**

The purpose of the Scholarship is to provide college scholarship awards to students who have shown a career interest college education.

#### Eligibility

1. Applicants must be full-time undergraduate students attending a 4-year accredited college or university.

#### **Application Requirements**

To be considered for a Scholarship Award, applicants must complete an application and return it to YCA by October 1<sup>st</sup>. The application must include:

- 1. A completed application form. Only completed application forms will be considered.
- 2. Two letters of recommendation with at least one from a teacher or a school official at the college level.

Note that all application materials must be received by September 17, 2018



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# A. **General Information** Applicant First Name\_\_\_\_\_\_Last Name\_\_\_\_\_ Contact Address City\_\_\_\_\_ State\_\_\_\_ Zip Code\_\_\_\_\_ Email\_\_\_\_\_Phone\_\_\_\_ В. **Education Information** Department and Major\_\_\_\_\_ Department Address Zip/Postal Code \_\_\_\_\_ City \_\_\_\_\_State Expected Graduation Date \_\_\_\_\_ Degree Expected \_\_\_\_\_

What was your grade point average last semester (A=4.0)?



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Schools Previously Attended:		
High School / Colleges	Dates Attended	Degree Earned (if any)
Application Statement:		
The information provided in my accurate, and I understand that fascholarship.		
Completed application forms sho thesecretary@yorubaclubofarizo name.	<u>-</u>	s's last name as part of the file
Submission of Letters of Recor	nmendation	
Letters of recommendation shou the file name) directly thesecreta capacity in which the letter write capacity.	<u>ry@yorubaclubofarizona.org</u> . T	he letter should indicate the
Questions about the application thesecretary@yorubaclubofarizo	•	
Note that all application mater	ials must be received by Septem	nber 15th, 2018.
Applicant's Signature:		Date