



American Institute of Polish Culture of Tampa Bay, Inc.

Mailing address: P.O. Box 4512, Clearwater, FL 33758

1521 North Saturn Ave, Clearwater, FL 33755

AIPCtampabay@gmail.com www.AIPCtampabay.org

AIPC Scholarship Application

Please fill out and scan back via email with the required attachments - email to the address above.

No handwritten applications will be accepted.

APPLICANT INFORMATION:

Title:	First Name:	Middle Name:	Last Name:

Date of Birth:	Place of Birth:

Cell Phone:	Optional Phone:
Email Address:	

MAILING ADDRESS:

Street Address:	City:	State:	Zip Code:

PERMANENT ADDRESS (if different from above):

Street Address:	City:	State:	Zip Code:

CITIZENSHIP STATUS:

<input type="radio"/> US Citizen	<input type="radio"/> Permanent Resident	<input type="radio"/> Other:	
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FAMILY BACKGROUND:

Are you of Polish Descent?	<input type="radio"/> YES <input type="radio"/> NO
Rate your knowledge of the Polish language:	<input type="radio"/> None <input type="radio"/> Poor <input type="radio"/> Fair <input type="radio"/> Good <input type="radio"/> Excellent <input type="radio"/> Native language <input type="radio"/> Heritage Speaker

PAEA SCHOLARSHIP ADDITIONAL INFORMATION:

Have you received or applied for AIPC scholarship before?	<input type="radio"/> YES <input type="radio"/> NO	If YES, what year?	
Are you or your family AIPC members?	<input type="radio"/> YES <input type="radio"/> NO	Who?	
How did you hear about this scholarship?			

EDUCATION:

Name of Attending Institution (college):	
Current Status - only full-time students will be considered:	<input type="radio"/> Freshman <input type="radio"/> Sophomore <input type="radio"/> Junior <input type="radio"/> Senior <input type="radio"/> Graduate School <input type="radio"/> Doctorate
Date of expected graduation:	
Major/Minor:	
Grade Point Average:	
Semester hours completed:	
SAT/ACT Scores:	
Name of High School, City, State and date of graduation:	
What fellowships or financial grants do you presently hold, if any?	
What tuition costs do you expect for this academic year?	

COMMUNITY SERVICE AND VOLUNTEER WORK

(Include any Honors/Recognitions):

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LEADERSHIP POSITIONS HELD (elected or appointed):

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INTERESTS AND ACTIVITIES (outside of schoolwork or professional activities):

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WORK HISTORY (if applicable):

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REFERENCES (Professional or Personal):

References should be submitted directly to AIPC either by mail to P.O. Box 4512, Clearwater, FL 33758 or emailed to AIPCTampaBay@gmail.com.

Include one or more letters of reference:

1. Letter from your teacher/professor, guidance counselor or academic advisor who can attest to your academic or professional ability, from whom you will request letters of recommendation, to be sent directly to the AIPC

Name:		Title/Position:	
Address:			
Phone:		Email:	

2. Personal Reference (optional):

Name:		Title/Position:	
Address:			
Phone:		Email:	

CERTIFICATION AND RELEASE AUTHORIZATION:

The following information must be completed for the applicant to be considered for a scholarship award.

- I certify this information is true, complete and accurate
- I authorize the release of this information to confirm and/or verify this application
- I agree to use any scholarship funds awarded at an accredited educational institution
- I authorize American Institute of Polish Culture of Tampa Bay, Inc. to publish my name and/or photo for use in AIPC promotional materials, news releases and/or social media

The candidate is responsible for understanding the requirements and submitting the required documents. If you have questions about the application, email AIPCTamabay@gmail.com.

Scholarships are awarded for the subject areas specified in the candidate's application. Changes in circumstances following scholarship notification must be communicated to AIPC and may result in re-consideration or cancellation of the scholarship award.

**APPLICANT
SIGNATURE:** _____

DATE: _____

Printed Name: _____

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