

SOO YUEN BENEVOLENT ASSOCIATION

806 Clay Street, San Francisco, CA 94108, U.S.A.

Telephone: (415) 421-0602 Fax: (415) 421-0606

www.SooYuen.org

APPLICATION FOR SCHOLARSHIP (print on 8½" x 14" paper)

ATTENTION: To qualify for scholarship:

1. Applicant's parent must have been a registered member of the SOO YUEN BENEVOLENT ASSOCIATION, San Francisco for at least one full year at the time this application is submitted.
2. Applicant must be a high school graduate during the year 2017.
3. Applicant must submit this application together with school transcripts, SAT scores, email address and/or fax numbers to this ASSOCIATION **NO LATER THAN 5:00 PM**, January 2, 2017.
4. Applicant must appear on the 4th floor at the above address for interview by the Scholarship Committee at 9:00 AM, Saturday, January 14, 2017.
5. Applicant must have achieved an overall grade point average (GPA) of 3.3 or higher on the 4.0 scale.
6. To receive award, the recipient or guardian must be present at the Scholarship Award Ceremony in the afternoon of 2/3/2017.

NAMES (CHINESE AND ENGLISH)

ADDRESS

ZIP

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TELEPHONE

GRADUATING SCHOOL

DATE OF GRADUATION

1. Scholastic Achievements:

2. Extra-Curricular Activities:

3. Out-of School Activities:

4. Plans For After Graduation From High School:

5. Personal Achievements (Awards, Honor Classes, Etc.):

I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT.

Signature of Applicant

Print Name of Parents or Guardian

Signature of Parents or Guardian

SOO YUEN BENEVOLENT ASSOCIATION REGISTRATION NUMBER OF PARENT OR GUARDIAN