

Mablean Ephriam Foundation
SCHOLARSHIP APPLICATION

NAME: _____

ADDRESS: _____
(street address, city, state, zip)

HOME PHONE: _____ BUSINESS PHONE: _____

CELL PHONE: _____ E-MAIL: _____

DATE OF BIRTH: _____ SOC. SEC. NUMBER: _____

HIGH SCHOOL ATTENDED: _____

G.P.A. _____ RANK IN CLASS: _____

AWARDS/HONORS: _____

HOBBIES/INTERESTS: _____

EXTRA-CURRICULA ACTIVITIES: _____

COMMUNITY ACTIVITIES: _____

COLLEGE TO ATTEND/ATTENDING: _____

MAJOR/INTENDED MAJOR: _____

ANNUAL INCOME OF FAMILY: _____

YOUR ANNUAL INCOME (if any): _____

EMPLOYER: _____

ALL APPLICANTS:

Please attach an essay of no more than two pages, typewritten, double spaced, stating why you want to go to college; what you plan to do with your college education to improve the quality of life for all citizens; what distinguishes you from other applicants; why should you be awarded this scholarship.

FOR APPLICANTS 20 TO 35 YEARS OF AGE:

Please tell us what you have been doing with your life since high school graduation; why you did not go to college after high school graduation and your motivation to go to college now.

DEADLINE FOR SUBMISSION: must be received in mail or by fax no later than **May 22, 2009 at 5 P.M.** ,close of business day. **NO EXCEPTIONS.**

Mail to: Mablean Ephriam Foundation
Post Office Box 39A60
Los Angeles, CA 90039

Fax to: 323 664-5325