



Michiana Chapter AFS Scholarship Application

Name:	
Phone:	Date of Birth:
Street:	
City, State, Zip:	

College Name:
Street:
City, State, Zip:

Faculty Advisor's Name:
Street:
City, State, Zip:

Parent's Name:
Street:
City, State, Zip:

Parent Employer's Name:	
Position Held:	Street:
City, State, Zip:	
Is parent an active AFS member?	

Honors, awards, notable activities:

Work Experience (in high school and currently):

Why are you applying for this scholarship?

What are your occupational goals?

What are your interests?

Are you (spouse/parent) an AFS member? If so, what chapter?
Are you an FEF student?

Signature:	Date:
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Please attach the following:

1. Transcript of your grades
2. Two (2) letters of recommendation (of which one must be from your faculty advisor)

RETURN TRANSCRIPT OF GRADES, LETTERS OF RECOMMENDATION, AND THIS APPLICATION, NO LATER THAN **MARCH 31, 2008** TO:

Lon Kipfer, Scholarship Chair

Michiana Chapter AFS
C/O Bremen Castings Inc.
 500 North Baltimore Street
 P.O. Box 129
 Bremen, IN 46506 USA

Questions? 574-546-0500 or LkipCo@yahoo.com