1. An applicant must be of Armenian descent and involved in the Armenian community.
2. An applicant must be enrolled in a college or university in pursuit of an undergraduate or graduate degree.
3. An applicant must answer all the questions, sign the application form and provide copies of academic transcripts. All transcripts must be certified transcripts mailed directly from the school.
4. Previous scholarship recipients are eligible.
5. All applicants will be considered based on service to, or participation in the Armenian community, scholastic achievement and financial need.

Please send completed applications and transcripts to:

TIBREVANK ALUMNI, INC.
VAHAN ADJEMIAN SCHOLARSHIP FUND
P.O Box 14
PALISADES PARK, NJ 07650

ALL APPLICATIONS AND SUPPORTING TRANSCRIPTS MUST BE RECEIVED NO LATER THAN APRIL 30
VAHAN ADJEMIAN SCHOLARSHIP FUND OF TIBREVKANK ALUMNI, INC.
SCHOLARSHIP APPLICATION (Please print or type)

NAME __________________________________________ TELEPHONE ( ) ___________________________________
( Last) (First) (Middle)

E-MAIL __________________________________________

HOME ADDRESS ______________________________________
(No. & Street) (City) (State) (Zip)

BIRTHDATE ____________________ BIRTHPLACE ____________________
(Month Day Year)

COLLEGE/UNIVERSITY ATTENDING ___________________________ CLASS ______________

MAJORS IN COLLEGE _________________________________________

NAME SCHOLASTIC HONORS OR AWARDS RECEIVED
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

STATE BRIEFLY YOUR PLANS FOR CONTINUING YOUR EDUCATION AND WHAT SUBJECTS YOU WILL PURSUE
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

NAME ANY AID OR GRANTS YOU ARE RECEIVING
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

STATE THE DEGREE OF YOUR INVOLVEMENT IN THE TWO CATEGORIES LISTED:
(USE ADDITIONAL SHEETS IF NEEDED)

COMMUNITY __________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

SCHOOL __________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

STATE YOUR FUTURE ETHNO-CULTURAL PLANS FOR THE ARMENIAN COMMUNITY AND THE SCHOOL
(USE ADDITIONAL SHEETS IF NEEDED)
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

PAGE 1 OF 3
FATHER’S NAME ___________________________________________ TEL: ( ) ____________

FATHER’S ADDRESS
(No. & Street) (City) (State) (Zip)

OCCUPATION _____________________________________________

MATHER’S NAME ___________________________________________ TEL: ( ) ____________

MATHER’S ADDRESS
(No. & Street) (City) (State) (Zip)

OCCUPATION _____________________________________________

NAME TWO PERSONS, OTHER THAN RELATIVES, AS CHARACTER REFERENCES

1. NAME_________________________________________________ TEL: ( ) ____________
ADDRESS _________________________________________________
(No. & Street) (City) (State) (Zip)

E-MAIL ____________________________________________________

2. NAME_________________________________________________ TEL: ( ) ____________
ADDRESS _________________________________________________
(No. & Street) (City) (State) (Zip)

E-MAIL ____________________________________________________

PLEASE STATE YOUR FUTURE EDUCATIONAL PLANS, YOUR CAREER AMBITIONS AND
FINANCIAL REASONS FOR YOUR REQUEST. (USE ADDITIONAL SHEETS IF NEEDED)

________________________________________________________________________
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PAGE 2 OF 3
STATEMENT

I hereby submit my application for Vahan Adjemian Scholarship Fund of Tibrevank Alumni, Inc. In so doing I attest to the veracity of the information provided, including certified copies of my College/University transcripts. Furthermore, I understand that before any award can be made I must first apply to and be accepted at a recognized University or College, registered and complete at least a course load required to retain standing as a full-time. I also understand that the award will be made for (1) one academic year.

SIGNATURE OF APPLICANT

DATE

APPLICANT PLEASE NOTE:

Your scholastic transcripts must be certified transcripts mailed directly from the school. A small photograph of yourself must be submitted together with this application form. No photographs will be returned.