

ADIM USA INC. SCHOLARSHIP AWARD

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STUDENT APPLICATION
FOR FALL 2016 / 2017 ACADEMIC YEAR

ADIM USA INC. gratefully acknowledges the support of the professional organizations, corporations, and individuals who have made it possible to provide these scholarships.

ADIM USA INC. SCHOLARSHIP AWARD

Developed and Funded by:
ADIM USA INC.

I. Purpose

This scholarship is geared towards the academic enhancement of students with financial need who otherwise would not have gained excellent and practical educational experience to better their lives and that of their community.

II. General Scholarship Parameters

- This is a one-time \$1000.00 scholarship award for one school year (two semesters, excluding summer school semesters and intersession) beginning with the fall semester.

III. Application Timelines

- A complete application must be received by May 29, 2016 to be considered for the scholarship award.
- Award decisions will be made on or before August 29, 2016.
- Only those applicants who are selected will be notified thereafter.

IV. Selection Criteria

- Academic performance at the high school, undergraduate, graduate school levels.
- Financial need.
- General factors such as leadership skills, community activities or special accomplishments.

V. Eligibility Requirements

- A Citizen of the United States of America.
- New York City Resident.
- Currently enrolled in or have been accepted to any College / University pursuing a degree in any discipline
- Demonstrate financial need and have not less than 3.0 GPA.

Note that any student who receives a scholarship is required to attend school, day or evening, on either a full-time or part-time enrollment basis.

VI. How To Apply

The ADIM USA INC. SCHOLARSHIP AWARD is administered by ADIM USA INC. Completed applications may be submitted by mail to attn: Okwa Okon at the address shown below.

Margaret Owai
ADIM USA INC.
Brooklyn, NY 11238

ADIM USA INC. SCHOLARSHIP AWARD
APPLICATION FORM
2016/ 2017 Academic Year

(Please print legibly. Use additional paper if necessary)

DATE: _____

Section A: Personal Information

First Name: _____ Last Name: _____

Date of Birth: _____ Social Security #: _____

Sex: (check one) _____ Female _____ Male Have you applied in the past? [] Yes [] No

Address: _____ Apt#/Box#: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Name of Parent or Guardian: _____

Parent's Address (if different from above):

Address: _____ Apt#/Box#: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Country of Citizenship: _____

Are you a New York City Resident? ___ Yes ___ No

How did you hear about this award? _____

Section B: Educational Information

Please check one: ___ Undergraduate Student ___ Graduate Student

High School Name: _____

Year of Graduation: _____ High School GPA: _____

Undergraduate College/University attending or admitted to: _____

Major: _____ Minor: (if applicable): _____

Expected Year of Graduation: _____ Undergraduate GPA: _____

Graduate School Name _____

Expected Year of Completed: _____ Graduate School GPA: _____

Course of Study: _____

Student's Address (Campus):

Address: _____

Apt#/Box#: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Section C: EXTRA-CURRICULAR ACTIVITIES

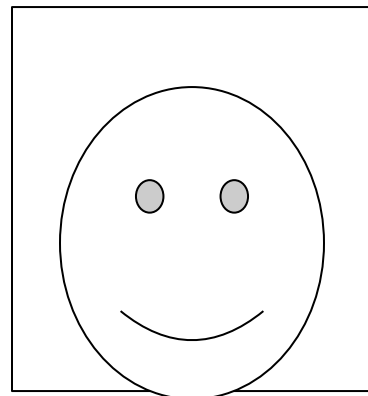
Please list information or include details about the following:

School Related Activities:

Community Activities / Special Accomplishments:

Honors and/or Awards:

Hobbies, Talents, Special Interests:



What is your primary career goal?

(Please affix your photograph)

Section D: FINANCIAL INFORMATION

[] I have attached a completed FAFSA (Free Application for Federal Student Aid) form, along with the supporting documentation (required).

Family gross income from your recent tax information \$ _____

Total number in the household _____

Total number in the household who are currently in college _____

APPLICATION CHECKLIST

This application becomes complete and valid only when you have submitted:

- ___ Completed and Signed Scholarship Application Form
- ___ Copy of Your Acceptance Letter
- ___ FAFSA Form and any supporting documentation
- ___ High School Transcript (for incoming college students)
- ___ Transcripts for Enrolled Students
- ___ Photograph
- ___ Two letters of Recommendation from, but not limited to, former teachers, college administrators, community leaders or other similar persons concerning the academic ability, character, reputation or professional aptitude of the applicant.

I understand and agree that the information provided in this Application and any other information provided in connection with this Application ("Application information") will be used by ADIM USA INC to determine my eligibility for The ADIM USA INC. Scholarship Award program.

APPLICANT SIGNATURE AND CERTIFICATION

I certify that the statements and information provided in this application are true and accurate to the best of my knowledge. Falsification of any information will cause my disqualification from the scholarship. I understand that if my application is not complete, I may be disqualified and will not be considered for a scholarship.

This application, upon receipt, becomes the property of ADIM USA INC.

I give permission to ADIM USA INC. to use my photo and or any information obtained for the publicity purposed, related strictly to this scholarship.

Print Applicant's Full Name

Applicant's Signature

Today's Date