

RICHARD STRAKA MEMORIAL SCHOLARSHIP FUND

Application for Scholarship – 2019

PLEASE PRINT IN INK OR TYPE

Personal Information:

Name _____ Date of Birth _____
 First Middle Initial Last Month/Day/Year

Address _____
 Number Street City State/Zip Code

Telephone _____ S.S.# _____ Gender _____
 (Optional)

Family Information:

Father _____ Occupation _____

Employer _____ Salary _____

Mother _____ Occupation _____

Employer _____ Salary _____

Guardian _____ Occupation _____

Employer _____ Salary _____

If Grandparent works for the Illuminating Company _____
 Name

IAEI Member's Name _____

IAEI Membership Number _____

Your relationship to IAEI Member _____

Your Parents' or Guardian's last year total income from all sources _____

How many dependents on this income _____

Are your parents Married _____ Separated _____ Divorced _____

If Separated/Divorced, with whom do you live? _____

High School:

Name _____ Graduation Date _____

City/State _____ GPA _____

Rank in Class _____ Class Size _____

College:

Have you applied for college? _____ Accepted? _____ Pending? _____

Name of College _____

Address _____

Two or Four Year College _____ Do you plan to attend: Full or Part Time _____

Will you live on campus or commute: _____

What is your intended major: _____

What is the total annual costs? _____

Do you plan to work while at college? Yes _____ No _____

Work Experience:

List your work experience for the last four (4) years:

| <u>Occupation</u> | <u>Employer</u> | <u>From/To</u> | <u>Earnings</u> | <u>Part/Full Time</u> |
|-------------------|-----------------|----------------|-----------------|-----------------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

Scholarships:

List all scholarships, grants or loans you are seeking or have been awarded:

| <u>Name/Type</u> | <u>Amount</u> | <u>Granted/Pending</u> |
|------------------|---------------|------------------------|
|------------------|---------------|------------------------|

List your extracurricular activities and offices:

High School (Indicate year 9, 10, 11, and/or 12)

Honors:

List all special honors and awards received. (High School – indicate year received):

Interests/Hobbies:

List areas of special interest and hobbies (include community and volunteer work):

Future Plans:

What are your plans and hopes for the near future? Why do you want to continue your education and why this field of study? What are your long range goals?

(Approximately 200-250 words, on a separate sheet of page).

Recommendation Letters:

(Include no more than three)

Signature

All of the information is complete and accurate to the best of my knowledge.

Signature of Applicant

Date

Signature of Parent or Guardian

Date

All applications must be postmarked no later than **April 15th, 2019**.

Mail or email the completed application form and recommendation letters to:

Richard Straka Memorial Scholarship Fund
1452 Newport Drive
Macedonia, Ohio 44056-1968
or
debockrath@outlook.com

Thank you