Over \$287,000 IN SCHOLARSHIPS WILL BE AWARDED TO MEMBERS OF



24950 Chagrin Blvd., Cleveland, Ohio 44122 • 1-800-464-4642 www.fcsla.org

COLLEGE AND GRADUATE 2025 SCHOLARSHIP APPLICATION

RULES OF ELIGIBILITY

- 1. An eligible applicant for a First Catholic Slovak Ladies Association Fraternal Scholarship Award must meet the following qualifications:
 - a. A member of good standing with the Association for at least three years prior to date of application <u>and</u> hold one of the following policies in his or her own name: a \$1,000 minimum permanent life insurance certificate; a \$5,000 minimum term certificate; or an annuity certificate. Such membership standing shall be verified from the records of the Home Office.
 - b. Members currently in **Z-Branches** from the former Polish Women's Alliance of America (PWAA) are eligible for FCSLA scholarships once they hold, in their own name, an <u>FCSLA issued</u> policy for 3 years prior to date of scholarship application. Other scholarship opportunities are available exclusively to Z Group members through the PWAA Charitable and Educational Foundation. Interested members should contact the Scholarship Department at Scholarship@fcsla.org or call 1-800-464-4642 ext. 1054.
 - c. Select an accredited college or university located <u>in the United States</u> and be enrolled **full-time (12 or more credit hours)** in a program leading to an associate or bachelor's degree or to include post-graduate work leading to at least an associate's degree.
 - d. Applicants are eligible to win **once** in **each** of the 5 categories: Early elementary school (grades 1-4); older elementary school (grades 5-8); high school; college or vocational/technical/trade school; and as a graduate student.
 - e. The Award must be used for school-related expenses (e.g., tuition, books, fees, and course or degree-related costs (like supplies and equipment required for specific classes) for the academic year for which it was awarded.

2. Application requirements:

- a. Freshman applicants: Submit an **official** transcript of high school grades, including the most recent grading period, along with any scores of a college entrance examination board test. Freshman applicants who are undecided about their school choice should place a check mark on the last page of the application right below the name and address of college or university field. A letterhead copy of the document of acceptance to the college named in this application must be received by the Scholarship Department before payment will be made.
- b. Other college and graduate applicants: Submit the most recent official transcript of the student's college or university record. Applicants can also have his or her school send an official copy via postal mail or e-mail on his or her behalf please indicate this on the application.
- c. Submit a letter of recommendation not from a family member.

- d. **An autobiographical statement** of approximately 500 words containing your goals and objectives. Describe any demonstrated leadership skills. In one of the paragraphs describe how you were involved in school activities. In another, give details of your church or community service. Was it voluntary? Mandatory?
- e. Include a **wallet-sized photo**. It must be an actual photo printed on photo paper or a .jpg attachment to an e-mail when submitting electronically. Poor quality photos cannot be published.
- f. All applications and supporting documents must be POSTMARKED or electronically received no later than Tuesday, February 11, 2025. Applications postmarked or electronically received after this date will not be considered. Materials submitted in support of the application will not be returned. Application and supporting documents may be submitted electronically as an e-mail attachment (PDF file) or fax. Our e-mail address is scholarship@FCSLA.org; our fax number is (216) 464-9260 (Attn: Scholarship Dept.).
- 3. 146 Fraternal Scholarship Awards will be awarded as follows:

Freshmen - \$1,250 each Sophomores - \$1,250 each Juniors - \$1,250 each Seniors - \$1,250 each Graduate Awards - \$1,750 each

- 4. The final decision will be made by an outside committee in the education field (Judging Committee). Winners will be notified by letter the 2nd week in May 2025. Names of winners will be published in the August issue of "Fraternally Yours." Award checks will be issued on or about July 1st in the name of the college or university and in the name of the winning student.
- 5. Send the completed application and all required documents to:

FCSLA Life
ATTN: Scholarship Dept.
24950 Chagrin Blvd.
Beachwood, OH 44122
E-mail: Scholarship@fcsla.org

E-mail: <u>Scholarship@fcsla.org</u> Fax: (216) 464-9260

To contact the Scholarship Department: Phone: (216) 464-8015 Ext. 1054 or (800) 464-4642 Ext. 1054

FCSLA LIFE TERMS OF AWARD

- 1. The award must be used for school-related expenses (e.g., tuition, books, fees, and course or degreerelated costs (like supplies and equipment required for specific classes) for the academic year for which it was awarded.
- 2. In the event a scholarship recipient in any of the groups decides to withdraw the award must be returned to First Catholic Slovak Ladies Association Fraternal Scholarship Fund.
- 3. The recipient shall observe all regulations of the educational institution, including—without limitations--those regarding residence and discipline satisfactory to the vocational, trade, technical school or college.
- 4. The Board of Directors of First Catholic Slovak Ladies Association reserves the right to withdraw and cancel the Fraternal Scholarship if, in the judgment of the Board and of the college, university, high school or elementary school, the recipient is no longer eligible to hold the scholarship.
- 5. Any member studying for the Catholic priesthood or religious life is eligible to receive two (2) scholarships if qualified and approved, and all requirements are fulfilled.



2025 COLLEGE & GRADUATE Fraternal Scholarship Application

24950 Chagrin Blvd. Beachwood, Ohio 44122

Home Office Use	

For the purpose of establishing my eligibility for a scholarship award, I submit the following information which I represent to be true and complete. I have read in entirety the Rules of Eligibility and Terms of Award and I hereby accept and agree to said Rules and Terms. I will be attending school in the fall as a (circle one): Freshman Sophomore Junior Senior Graduate My estimated graduation date is Month **APPLICANT'S PERSONAL INFORMATION** (please print or type) Full Name: **Home Address:** (street) (citv) (state) (giz) Social Security # (last 4 digits): Email: Date of Birth: Telephone: Father's Name: Mother's Maiden Name: 1. Have you ever received an FCSLA Fraternal Scholarship Award? (circle one) If yes, enter: Most recent Year Category Amount 2. Is the college or university you will be attending located within the U.S.? Ν (circle one) Υ 3. Will you be attending classes full-time (12 or more credit hours)? (circle one) Ν _____ (1.) My official transcripts are enclosed 4. Please check all that apply: (2.) I will mail my official transcripts separately to FCSLA (3.) Letter of acceptance is pending; I will mail to FCSLA upon receipt (4.) My school will mail my official transcripts directly to FCSLA Select One: (Your choice does not affect eligibility) I am attaching my photograph (a photo printed on photo paper or a .jpg attachment to an e-mail). If selected as a scholarship recipient, I would like it to be included in the FCSLA publication announcing this year's winners. I elect not to include a photograph of myself. If selected as a scholarship recipient, no photo will be included in the

FCSLA publication announcing this year's winners.

APPLICANT'S SCHOOL INFORMATION

	Name and Location of Sch	ool Dates	of Attendance	Date of Graduation		
High School						
College						
		t be POSTMARK	ED or electronical	ly received no later than Tuesday,		
February 11, 202	<mark>23.</mark>					
With this Scholar Official tr	ship Application I have enclosed	d these requireme	nts:			
Autobiog	raphical statement					
	acceptance (if Freshman) entrance exam (if applicable or l	Erochman)				
	Recommendation	resililali)				
Photo (if desired)						
	Application for scholarsh	nip and required o	documents should	be mailed to:		
	_	FCSLA Life				
	, , , , , , , , , , , , , , , , , , ,	ATTN: Scholarsh 24950 Chagrin				
		Beachwood, Ohio	44122			
	E-m	ail: Scholarship Fax: (216) 464-				
		` '				
				n, books, fees, and course or degree- mic year for which it was awarded.		
(please initial)		ed for specific clas	sses) for the acade	The year for which it was awarded.		
Loortify that the in	oformation on this form and the	cupporting docum	ante are true and co	omplete to the best of my knowledge.		
				ing Committee. I consent to the filing		
of the application	and accept the Rules of Eligibi	lity and Terms of A	ward.			
	Data					
	Date					
	Signature of applicant		Signature of pa	rent or guardian if under age 18		
e.g. active of applicant						
Ma	iling address of applicant	 -	Mailing address	of parent or guardian if different		
TO BE COMPLE	TED AT HOME OFFICE					
Certificate N	o. Date Issued	Amount		Plan		
	<u> </u>					
Date of Members	hin	\/	erified by			



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2025 COLLEGE & GRADUATE Fraternal Scholarship Application

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					Home Office Use	
Student's FIRST NAME ONLY:						
I am applying for a First Catholic Slov year 20	ak Ladies Asso	ciation Fraternal S	cholarship Aw	ard for the aca	idemic period begi	nning
I will be attending as a (circle one):	Freshman	Sophomore	Junior	Senior	Graduate	
Name and address of college or univ	ersity selected	within the United S	States			
○ Check here if you are currently un	decided.					

TO BE COMPLETED BY JUDGING COMMITTEE:

JUDGING CRITERIA:

Category	Max Score	Actual Score
Academic Standing	40	
Church/Community Value	30	
School Involvement/Essay	30	
Total Points		
(must not exceed 100 pts)	100	

ESSAY REQUIREMENT:

An autobiographical statement of approximately 500 words containing your goals and objectives. Describe any demonstrated leadership skills. In one of the paragraphs describe how you were involved in school activities. In another, give details of your church or community service. Was it voluntary? Mandatory?

LETTER OF RECOMMENDATION: Required