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



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

# ELEMENTARY SCHOOL (Grades 5-6-7-8) 2025 SCHOLARSHIP APPLICATION

#### **RULES OF ELIGIBILITY**

- 1. An eligible candidate 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 a Private or Catholic accredited elementary school in the United States.
  - 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 & VTT; and as a graduate student.
  - e. The Award must be used toward school-related expenses (e.g., tuition, books, fees, and school-related costs like supplies and equipment required for specific classes) for the academic year for which it was awarded.

#### 2. Application Requirements:

- a. Submit a copy of the **official** grade report of the most recent school year.
- b. Submit a written essay of approximately 100 words on "What I Like Best About My School". Please indicate at the end of your essay any school activities and volunteer work in which you participated.
- a. Submit a letter of recommendation not from a family member.
- c. 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.
- d. 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 <a href="mailto:scholarship@FCSLA.org">scholarship@FCSLA.org</a>; our fax number is (216) 464-9260 (Attn: Scholarship Dept.).

- 3. The final decision will be made by an outside committee in the education field. **Winners will be notified by letter the 2**<sup>nd</sup> **week in May 2025**. Names of winners will be published in the August issue of "Fraternally Yours". The Award checks will be issued in the name of the elementary school and the name of the winning student.
- 4. 32 Elementary School Fraternal Scholarship Awards will be given as follows:

5<sup>th</sup> graders - \$750 each 6<sup>th</sup> graders - \$750 each 8<sup>th</sup> graders - \$750 each

5. Send completed application and address all communications to:

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

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 school-related 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 the 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 college, university, high school or elementary school.
- 4. The Board of Directors of the 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.



# 2025 ELEMENTARY SCHOOL (Grades 5-6-7-8) Fraternal Scholarship Application

#### 24950 Chagrin Blvd. Beachwood, Ohio 44122

·				
			Home	e Office Use
For the purpose of establishing my eligi represent to be true and complete. I have accept and agree to the said Rules and To	e read in entirety			
will be attending school in the fall in (circle	one): 5 <sup>th</sup> Grad	e 6 <sup>th</sup> Grade	7 <sup>th</sup> Grade	8 <sup>th</sup> Grade
APPLICANT'S P	ERSONAL INF	ORMATION (plea	se print or type)	
Full Name:				
Home Address:		7-14	(-1-1-)	
(street)		(city)	(state)	(zip)
Social Security # (last 4 digits):		Email:		
Date of Birth:		Telephone:		
Father's Name:		Mother's Maiden	Name:	
Have you <u>ever</u> received an FCSLA Frater	nal Scholarship /	Award? (circle on	e) Y N	
If yes, enter: Year C	ategory	Amount		
	(3.) Letter of receipt (I	eport is enclosed eport will be mailed se acceptance is pendir First-year applicants o ol will mail my g <u>rade</u>	ig; It will be mailed to only)	
Select One: (Your choice does not affect eligib	bility)			
I am attaching my photograph (a pho scholarship recipient, I would like it to be inc				

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 Sc	nooi Dates o	r Attendance	Date of Graduation
Elementary				
				<del> </del>
	hip Application I have enclosed ade report	I these requirements:		
	Recommendation			
Photo (if o				
	,			
Applications and February 11, 2025		<mark>ist be POSTMARKE</mark>	D or electronical	ly received no later than Tuesday,
	Application for scholars	ship and supporting o	documents should	d be mailed to:
	First (	FCSLA Life	a Accesiation	
	First	Catholic Slovak Ladie ATTN: Scholarship		
		24950 Chagrin B		
		Beachwood, Ohio		
	E	-mail: <u>Scholarship@</u>		
		Fax: (216) 464-9	260	
				n, books, fees, and course or degree[- rear for which is was awarded. (please
understand that the		d confidential, for revie		mplete to the best of my knowledge. I consent to the filling of the
	Date			
Signa	ature of parent or guardian			
Olgric	attic of parent of guardian			
Mailir	ng address of applicant		Mailing address	of parent or guardian if different
TO BE COMPLET	ED AT HOME OFFICE			
Certificate N	o. Date Issued	Amount		Plan
Certificate IV	Date issued	AIIIOUIII		FIAII
		1		
Date of Membersh	in	\/c	rified hy	



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# 2025 ELEMENTARY SCHOOL (Grades 5-6-7-8)

Fraternal Scholarship Application	on	,		
			Home Of	fice Use
Student's FIRST NAME ONLY:				
l am applying for a First Catholic Slovak Ladies Associa year 20	ation Fraternal S	Scholarship Awar	d for the academi	c period beginning
will be attending school in the fall in the (circle one):	5 <sup>th</sup> Grade	6 <sup>th</sup> Grade	7 <sup>th</sup> Grade	8 <sup>th</sup> Grade
Name of school selected				

#### 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	100	
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#### **ESSAY REQUIREMENT:**

Submit a written essay of approximately 100 words on "What I Like Best About My School". Please indicate at the end of your essay any school activities and volunteer work in which you participated.

**LETTER OF RECOMMENDATION: Required**