

**Federation of Zacatecan International Benefit Organization, Inc.**

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**Scholarship Application**

Name \_\_\_\_\_

Social security number (optional) \_\_\_\_\_

Date of birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Birth place \_\_\_\_\_

Address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

City \_\_\_\_\_ Zip code \_\_\_\_\_

Club affiliation \_\_\_\_\_ Federation \_\_\_\_\_

College or University currently attending or been accepted to? \_\_\_\_\_

\_\_\_\_\_ How long? \_\_\_\_\_

School address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Major field of study \_\_\_\_\_

Number of units completed \_\_\_\_\_ G.P.A. \_\_\_\_\_

Expected graduation date \_\_\_\_\_

If first semester in college indicate high school G.P.A. \_\_\_\_\_

Father's name \_\_\_\_\_

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_

Mother's name \_\_\_\_\_

Date of birth \_\_\_\_\_ Place of birth \_\_\_\_\_

Letters of recommendation were requested from the following (two) individual.

1. \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

2. \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

Co-curricular activities: list all organizations and activities in which you are a member or have participated in while attending college or high school.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Community activities: list your present and/or most recent experience with community organizations; volunteer or church activities, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

