



Fresno Chapter - Association of Mexican American Educators, Inc.
Scholarship Application 2019

Student Information

Last Name First Name Middle Name High School
Address City Zip Code Phone Number (List additional contact phone #)
Ethnicity/Nationality E-Mail Address

Name of college or university you will attend:
Intended Major/Career Goals:
Are you a first generation student to attend a college or university?
Indicate any unusual circumstances or obstacles you may have

Family Information

Father/Guardian: First Name Last Name Occupation Employer
Mother/Guardian First Name Last Name Occupation Employer
Marital status of parent or guardian: Married Divorced Widowed Single Separated
Total number of brothers and sisters living in the household brothers sisters

Certification and Authorization

All the information that I have provided in this application and in the enclosed letters is true and complete, to the best of my knowledge. I certify that I am currently enrolled and in good standing as a senior in high school, applying for full-time enrollment to a college or university for the next academic school year.
Applicant Signature (required) Date
Parent or Guardian Signature (required) Date

School Official Name (Print) Title Phone

School Official Signature (required) Date

Cum. Academic GPA #of AP Classes #of Honors Classes Class Rank Total Senior Class