

Florida Cleft Palate-Craniofacial Association, Inc.

Scholarship Committee
P.O. Box 6006
Brandon, FL 33508-6001

FCPA Scholarship

Information for Applicants

The FCPA Scholarship is awarded annually to a deserving Florida high school senior who meets the qualifications set forth by the Scholarship Committee of the Florida Cleft Palate-Craniofacial Association (FCPA). The scholarship is a one-time award of \$1,000.

Eligible to apply is any Florida high school senior with a cleft lip or palate or craniofacial anomaly who is nominated and sponsored by a member of the Association and who has been admitted to an undergraduate college or university.

The Scholarship Committee consists of six individuals designated by the Executive Committee of the Association.

The application process involves:

- A. Completion of an application form containing basic demographic information and summarizing past educational performance.
- B. Submission of a 125-word essay describing educational goals and any past or current community service activities. Rewarding active community service and academic excellence are the main goals of the scholarship.
- C. A letter of nomination from the sponsoring FCPA member.
- D. A letter of recommendation from an appropriate high school official (principal or guidance counselor).
- E. An official transcript showing all high school credits and grades through the first semester of the senior year.

All application materials should be submitted by March 28, 2009. The scholarship will be awarded in time so that the student may be recognized at his or her high school's graduation awards ceremony.

The application and all items supporting the application should be sent to the following address:

Scholarship Committee
Florida Cleft Palate-Craniofacial Association, Inc.
Box 6006
Brandon, FL 33508-6001

FCPA SCHOLARSHIP 2009 APPLICATION

Florida Cleft Palate-Craniofacial Association, Inc.

APPLICANT INFORMATION:

| | |
|-------------------------------|---------|
| Name: | SSN: |
| Home Address: | |
| | |
| Home Phone: | E-MAIL: |
| Hobbies or Special Interests: | |

ACADEMIC INFORMATION:

| | |
|---|--------------------------------------|
| High School: | Proposed Major or Career Goal: |
| | Date of Graduation: |
| Courses of Study: | Grade Point Average: |
| Extracurricular Activities: (List) | Community Service Activities: (List) |
| | |
| Colleges or Universities Applied to or University Admitted to (List): | |
| | |

Describe in 125 words or less why this scholarship should be awarded to you:

Applicant Signature

Date