|  |  |  |  |
| --- | --- | --- | --- |
| **AMMA SCHOLARSHIP 2024**  **(High School Graduates – Class of 2024)** | | | |
| Please type or print your answers. | | | |
| 1. | Last Name: | First Name: | |
| 2. | Mailing Address:  Street:  City: State: ZIP: | | |
| 3. | Daytime Telephone Number: email: | | |
| 4. | Date of Birth: Month Day Year | | |
| 5. | Any of your parents is an Office Bearer of AMMA 2024? (Please circle) Yes No | | |
| 6. | Is any of your parent a Malayalee descendant? (Please circle) Yes No | | |
| 7. | Current High School: | | |
| 8. | Which University / College will you be attending?  Proof of acceptance from the above University / College is required | | |
| 9. | Grade Point Average (GPA): (On a 4.0 scale)  Attach proof of GPA. | | |
| 10. | Have you taken the  ACT exam? Yes No ACT score: SAT exam? Yes No SAT score:  Proof required | | |
| 11. | Name & address of parent(s) or legal guardian(s):  Name (s)  Street: City: State: ZIP: Home phone of parents or legal guardians: | | |
| 12. | Are you a Resident of Georgia state? Yes / No | | How many years? |
| 13. | What specialty/major do you plan to major in as you continue your education? | | |
| 14. | List your academic honors, awards, and membership activities while in high school: | | |
| 15. | List your community service activities, hobbies, outside interests, and extracurricular activities: | | |

*Use an additional sheet if you need more room to list items 14 & 15*

|  |  |  |  |
| --- | --- | --- | --- |
| 16. | 1. The following items must be attached to this application in order for the application to qualify to be reviewed by the **Scholarship Review Council** (led by a head of an academic institution) by email to [amma@ammaatlanta.com](mailto:amma@ammaatlanta.com) 2. Your application will not be considered if these items are not attached to this application. (No exceptions.) 3. Circle “YES” or “NO” to be sure you have attached each item as required. | | |
|  | YES | NO | Completed application. All questions are answered completely. |
| YES | NO | Letters of Recommendation. |
| YES | NO | Proof of college acceptance or current student enrollment.  A copy of your college acceptance letter is required for receipt of funds. |
| YES | NO | Proof for SAT/ACT |
| YES | NO | Proof for Awards, Memberships, Academic honors, etc. |
| YES | NO | Proof for Community Services, Extracurricular activities, etc. |
| YES | NO | Personal Statement. Personal statement must not exceed 800 words, typed,  double-spaced, and 12 pt / Times New Roman font. |

**STATEMENT OF ACCURACY**

I affirm that all the above-stated information I provided is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose necessary to promote AMMA’s scholarship program (Note: Scholarship amount will be $500 per student)

I hereby understand that if chosen as a scholarship recipient, my family will take AMMA membership.

Signature of scholarship applicant: Date:

Signature of applicant’s guardian/ parent: Date: