

AHFA MERIT SCHOLARSHIP APPLICATION

Last Name: _____ First Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Email Address: _____

Date of Birth: _____

Cumulative Grade Point Average (GPA): _____

Most recent official transcript is required.

Name and location of post-secondary school attending: _____

APPLICATION CHECKLIST:

- Completed Student Application
- Current Official Transcripts
- Parent Employment Verification Letter
- Essay

On a separate sheet of paper please provide the following:

- List any academic honors, awards and/or membership activities while in school
- List your non-school sponsored volunteer activities in the community
- List your school and non-school related clubs and organizations
- Include one letter of recommendation from an academic advisor, coach, teacher etc.

EMPLOYMENT VERIFICATION (REQUIRED):

The information in this section is to be provided by the employer of the parent or guardian of the Applicant.

You have been asked to provide information as to the employment of the parent or guardian of the Applicant in support of this scholarship application. Please provide a letter on your company letterhead addressed to the American Home Furnishings Alliance Solution Partners Scholarship Program stating: [1] the parent or guardian's name, [2] the length of his or her employment with your company, and [3] a statement that he or she is employed by you. When provided, please return the letter to the parent or guardian of the Applicant. The letter must be dated within ten (10) days of the date of this application.

ESSAY INSTRUCTIONS:

The essay must be 500 words or less and typed.

Using one of your leadership roles, or an extracurricular activity you prioritized as being important to you, describe what impact the experience had on you, what you learned about yourself and how it influenced your plans for the future.

CERTIFICATION:

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted. This application becomes the property of American Home Furnishings Alliance.

Parent/Guardian Signature_____Date_____

Applicant Signature _____Date_____

Please send completed application materials, postmarked by midnight on January 31, to:

Solution Partners Education Fund
American Home Furnishings Alliance
PO Box HP-7
High Point NC 27261