



Scholarship Foundation Trust

2003 Howe Avenue
Sacramento, CA 95825
Tel: (916) 437-1226 | Fax: (916) 922-4103

2011 SCHOLARSHIP APPLICATION FORM

Guidelines and Procedures

1. **This application form must be completed in full and received in our office by the deadline of 5:00 p.m. Thursday, March 31, 2011.**
2. The following must accompany the application:
 - Copy of current official transcript from your accredited high school, college or university
 - Evidence of acceptance and intention to enroll for Fall 2011 term at a accredited college or university (or verification of current full-time enrollment if currently attending college or university).
 - A typed, 300-word essay describing your career objectives and the benefits to be gained from this financial award
3. Applicant must have maintained - and document - a cumulative grade point average of 3.5 (includes high school and all colleges attended).
4. Applicant must be a resident of Sacramento County or the City of West Sacramento, California for at least one year, or be a relative of a SAR Member or Affiliate and have a valid California Driver's License or California State Identification Card.

Type or use black or blue ink only. Print neatly. Attach additional sheet(s) if space is needed.

SECTION A - Applicant's Identification Information

Date of Application: _____

1.	Your Name:		
2.	Current Mailing Address:		
	Permanent Mailing Address:		
3.	Home Phone: ()	Cell Phone: ()	
4.	Email:	7.	State of Residence:
5.	Date of Birth: / /	8.	Proof of Residence (State ID, Drivers Lic. #, Passport):
6.	What is your current academic standing?		9.
	<input type="checkbox"/> High School <input type="checkbox"/> College/University <input type="checkbox"/> Freshman <input type="checkbox"/> Senior <input type="checkbox"/> Sophomore <input type="checkbox"/> Other (_____) <input type="checkbox"/> Junior		

SECTION B - Applicant's Education Information

10. List all high schools, colleges, universities and/or technical schools that you have attended. Begin with the high school, college, or university you are currently attending.

Name of High School/College/University	From	To	Major/Degree	GPA

11. What is your degree objective? Certificate Associate (AA) Bachelor (BA/BS) Other _____

12. Date which you expect to complete this objective: Month: _____ Year: _____

13. Your current enrollment status: Full-time (12 or more units) Part-Time (less than 12 units)

14. In which specific field are you planning your career? _____

15. List any scholarship(s) you have received within the last four years: _____

16. List any real estate classes you've completed or in which you are currently enrolled: _____

17. List any real estate classes you plan to take: _____

18. How did you learn of the SAR scholarship? _____

SECTION C - Applicant's Financial Information (Additional information may be requested)

21. Can you be claimed as a dependent on someone else's tax return? Yes No

22. How will your tuition and living expenses be paid? _____% Family _____% Work
 _____% Scholarships/Grants _____% Other: _____

23. Total Household Income in current year: 0-\$25,000 \$25,000 - \$50,000 \$50,000 - \$75,000
 \$75,000 - \$100,000 \$100,000 or above

24. List the applicants current savings, trust funds or other assets: _____

25. Applicant Employment Record (List current employer first)

Company:	From:	To:	Salary:
Address:	Supervisor:		
Phone Number:	Job Title:	Hrs/week:	
Reason for Leaving:			
Company:	From:	To:	Salary:
Address:	Supervisor:		
Phone Number:	Job Title:	Hrs/week:	
Reason for Leaving:			

SECTION D - Applicant's Extracurricular Activities (Attach a separate sheet if additional space is needed)

26. Club Memberships: _____

27. Sports: _____

28. Fraternity/Sorority/Professional Societies: _____

29. College/High School Government Involvement: _____

SECTION E – References – Three references are required. At least two must be academic references and the third may be academic or a personal reference. Your references must sign the application. Letters of referral are welcome but not required.

(1.) Instructor's Name:	Position: Instructor of
Signature:	Phone Number ()
(2.) Instructor's Name:	Position: Instructor of
Signature:	Phone Number ()
(3.) Name:	Position:
Signature:	Phone Number ()

By signing this application, I certify that all the information I have provided is true and correct to the best of my knowledge. I understand that falsification of any portion of this application is grounds for my withdrawal from consideration.

Signature of Applicant: _____ Date: _____

**APPLICATION FILING DEADLINE: THURSDAY, MARCH 31, 2011 @ 5:00 p.m.
NO LATE APPLICATIONS WILL BE ACCEPTED.**

Please submit your completed application and supporting materials to the following address:



Scholarship Foundation Trust
 2003 Howe Avenue
 Sacramento, CA 95825
Tel: (916) 437-1226, **Fax:** (916) 922-4103
Email: dhenry@sacrealtor.org
Attn: Devyn Henry, Administrative Project Manager

FOR OFFICE USE ONLY

Date Application Received: _____ **Reviewed for Completion by:** _____

Follow Up: _____

