Portuguese American Suncoast Association, Inc.

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Scholarship Application – High School Student This form contains two pages. Complete both in print. Application deadline is May 1st postmarked.

For High School Graduating Year: 2017

Last Name	First Name		Middle Name	
Address	City		State	Zip Code
Phone Number	Date of Birth	Place of	Birth	
Name of Parent(s) or Grandparent(s) who are members of F	PASA		
Name of High School Attended	High Scl	hool Address: City & State	High Scl	hool Phone number
College or University you will attend	l, City and State	Major Field of Stu	ıdy	Student Number
Describe how your Portuguese herit	and has impacted your	life (250 words minimum)		

Describe how your Portuguese heritage has impacted your life (250 words minimum)

Briefly describe any scholastic distinction or honors you have received since eleventh grade:

List any jobs you have held or your involvement in community activities in the past two years:

List in order of your preference, your high school extracurricular activities (athletics, band, choir, clubs, honor society, etc.)

Activity	Grade Level	Amount Of Time Spent Weekly	Special Honors or Awards

I certify that I have read and understand the Scholarship requirements as outlined in PASA-SCHOLARSHIP-REQ-2017, and I further certify that I meet all requirements, and that all information that I provided on this page is true.

Signature of Applicant

Date		

Signature of parent or guardian

Date