

EDPA LAS VEGAS CHAPTER - LAS VEGAS SCHOLARSHIP APPLICATION

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|--|--|
| <b>Name of Applicant:</b>                                  |  |
| <b>Address:</b>  |  |
| <b>City, State, Zip:</b>                                   |  |
| <b>Phone Number(s):</b>                                    |  |
| <b>Email:</b>  |  |
| <b>Date of Birth:</b>                                      |  |
| <b>Sex:</b>  | Male _____ Female _____                                    |
| <b>High School Attended:</b>                               |  |
| <b>Address:</b>  |  |
| <b>Phone:</b>  |  |
| <b>GPA:</b><br>(Enclose School Transcript)                 |  |
| <b>College Attending:</b>                                  |  |
| <b>Address:</b>  |  |
| <b>City, State, Zip:</b>                                   |  |
| <b>Student ID Number:</b>                                  |  |
| <b>Planned program of study:</b>                           |  |
| <b>Are you a full-time or part-time student?</b>           |  |
| <b>How many hours per Semester/Quarter are you taking?</b> |  |
| <b>Graduation Year:</b>                                    |  |
| <b>Will you be working while attending school?</b>         | Yes _____ (complete employer information on pg 2) No _____ |
| <b>If yes, how many hours will you work?</b>               |  |

LAS VEGAS SCHOLARSHIP APPLICATION  
**Financial Information**

|   |  |
|---|--|
| <b>Applicant's Employer:</b>                                  |  |
| <b>Employer Address:</b>                                      |  |
| <b>Job Title:</b>   |  |
| <b>Hourly Salary:</b><br>(Attach most recent W-2 or pay stub) |  |
| <b>Applicant's Father:</b>                                    |  |
| <b>Address:</b>   |  |
| <b>Phone:</b>   |  |
| <b>Father's Employer:</b>                                     |  |
| <b>Company Address:</b>                                       |  |
| <b>Job Title:</b>   |  |
| <b>Annual Salary:</b><br>(Attach most recent W-2)             |  |
| <b>Applicant's Mother:</b>                                    |  |
| <b>Address:</b>   |  |
| <b>Phone:</b>   |  |
| <b>Mother's Employer:</b>                                     |  |
| <b>Company Address:</b>                                       |  |
| <b>Job Title:</b>   |  |
| <b>Annual Salary:</b><br>(Attach most recent W-2)             |  |

- **APPLICANT MUST INCLUDE AN ESSAY EXPLAINING WHY THEY SHOULD RECEIVE THE SCHOLARSHIP.**  
 (Minimum 250 words, typewritten and double-spaced)

**Send Applications To:** EDPA Foundation  
 Attn: Alexandra Grider  
 1100 Johnson Ferry Rd, Suite 300  
 Atlanta, GA 30342