

NAME: _____ SSN: _____

Arctic Education Foundation

Personal Information for Initial Application

I. HISTORY

Previous Post-Secondary Schools Attended

Have you ever attended any prior post-secondary academic or vocational institution?

Yes No If Yes, please list:

NAME	ADDRESS	Dates attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

II. REFERENCES

References*

List Three References who will write Letters of Recommendation on your behalf:

NAME	ADDRESS	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

*These three references must write a Letter of Recommendation on your behalf for scholarship funding. Please request them to do so. For our purposes, the letter should focus on their knowledge of you and their belief that you will finish the education or training you are seeking.

III. SHORT PARAGRAPH ON YOUR PERSONAL PLANS UPON COMPLETION OF STUDY:

Signature

Date

Deadline dates: August 1; December 1; March 1; June 1
Submit your application at least by the deadline date *prior* to the start date of classes each school year.