

# CFMA GREATER NEW ORLEANS SCHOLARSHIP APPLICATION

At least \$2,000 scholarships to be awarded across at least two (2) scholarships.

Application deadline: April 30, 2022

Please include a transcript from the university at which you are enrolled.

Please include a cover letter. Resumes that include listed information are acceptable substitutes (please include signed certification).

## PERSONAL

Last: \_\_\_\_\_ First: \_\_\_\_\_

Home Address: \_\_\_\_\_

City State Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## EMPLOYER

Employer: \_\_\_\_\_

City State Zip Code: \_\_\_\_\_

Work Telephone: \_\_\_\_\_

Job Title/Responsibilities: \_\_\_\_\_

## SCHOOLS

Name(s) of post-secondary school enrolled in, major, classification, anticipated graduation date, and cumulative GPA.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## WORK EXPERIENCE

Employer/Position	Dates Employed	Job Responsibilities
_____	_____	_____
_____	_____	_____
_____	_____	_____

## ACTIVITIES, AWARDS, & HONORS

Detail any significant activities, awards, honors, etc. in the last four years both school and community

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## CERTIFICATION

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to give proof of information I have given on this form or in attached documentation. Falsification of information may result in termination of any scholarship granted.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## APPLICATION

Applicant is responsible for ensuring that application is submitted to:

CFMA Greater New Orleans Chapter. Email to : [greaterneworleans@cfma.org](mailto:greaterneworleans@cfma.org)