

# 2009 SOCAL SISTER CITIES SCHOLARSHIP GRANT APPLICATION

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: (Street, City, State, Zip, ) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

If a high school student, what College are you planning to transfer to? \_\_\_\_\_ Overall GPA \_\_\_\_\_

For college students, overall GPA \_\_\_\_\_ Major: \_\_\_\_\_

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

## CURRENT SEMESTER PROGRESS REPORT

Please list the courses you are taking and your expected grade.

| COURSE TITLE | GRADE TO DATE | UNITS |
|--------------|---------------|-------|
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### Application Check List. Due by Saturday, December 19, 2009

- This application page
- A copy of unofficial transcripts
- A one page summary of your activities in your sister city or other international exchange organization
- A letter of recommendation from a member of your sister city association or from another international exchange organization