



Federation of American Consumers and Travelers

318 Hillsboro Ave. • P.O. Box 104
Edwardsville, Illinois 62025
1•800•USA•FACT

Dear Applicant:

Enclosed is everything needed to apply for a FACT Scholarship.

Materials included:

- Application
- Release Authorization & Membership Verification Form
- Certification Form
- Rules and Instructions

Please read the rules and follow the instruction enclosed, then be sure to respond in time for everything to reach the FACT Membership Office by January 15, 2010.

Thank you for your interest and good luck.

Sincerely,

Vicki Rolens
Scholarship Coordinator

Enclosure

RULES AND INSTRUCTIONS FOR THE FACT "GRADUATING SENIOR" SCHOLARSHIP PROGRAM

1. Only FACT members and their immediate family members may apply.
2. Eligible to apply are students who will graduate from an accredited public, private or parochial high school (or equivalent) during the 2009-2010 school year.
 - a. Two scholarships will be awarded: one for \$10,000.00 and one for \$2,500.00.
 - b. Funds will be paid directly to the educational institution by FACT for tuition and books and approved related expenses.
 - c. A scholarship student must maintain a "C" grade point average in order to remain eligible for the funds.
 - d. The course of study must be approved by the FACT Scholarship Committee. Generally, any two- or four-year undergraduate degree program at an accredited college or university will be acceptable.
3. Not eligible to apply are FACT employees, directors, officers and their relatives.
4. The committee's decisions are made independently and without prejudice, and are final.
5. The essay and all forms must be typewritten or printed legibly in black ink.
6. The following must be submitted to reach the FACT administrative offices no later than **January 15, 2010**:
 - Application Form
 - Release Authorization & Membership Verification Form (*included in the application form*)
 - Certification Form (*included in the application form*)
 - **Official Copy of High School Transcript**, signed by the applicant's high school principal or academic advisor
 - An essay, up to two pages in length, double-spaced, as outlined in the application form

Mail to: FACT Membership Office, P.O. Box 104, Edwardsville, IL 62025

7. **Finalists** will be chosen on the basis of the quality of information submitted in the application.
8. **Finalists** will be required to submit a Financial Aid Report. Finalists may be contacted by one or more members of the FACT Scholarship Committee for a personal interview.
9. **Winners** will be chosen from among the finalists based on need.
10. Any questions should be made in writing to the above address. Telephone calls will be received between the hours of 10:00 am and 1:00 pm (Central Time) at 1-800-USA-FACT.



FACT SCHOLARSHIP PROGRAM

2009-2010 "Graduating Senior" Application Form

TO BE COMPLETED BY APPLICANT

DIRECTIONS:

1. This application must be typed or printed legibly in black ink.
NOTE: Answer the questions in the spaces provided –no attachments.
2. Only FACT members and their immediate families may apply.
3. Submit the following to the FACT membership service office at the address listed below by **January 15, 2010**:
 - the completed application form, making sure that the record release authorization form and the membership verification form are both completed,
 - an **official copy of your High School Transcript**, submitted by your high school principal or academic advisor,
 - an essay, up to two pages, double-spaced,
4. Applicant must be a student who will graduate during the 2009-2010 school year from an accredited public, private or parochial high school (or equivalent) in the 50 states or the District of Columbia.
5. Applicant must be enrolling in a two- or four-year undergraduate degree program at an accredited college or university, starting in the Fall of 2010.

BIOGRAPHICAL INFORMATION

1. Name: _____ Male Female
Last First M.I.
Maiden Name: _____
Address: _____ Date of Birth: ____/____/____
Number, Street & Apt. No.

City State Zip
Telephone: (____) _____ SS#: _____
2. Parent(s) or Guardian _____
Address if different: _____
Number, Street & Apt. No.

City State Zip
Telephone: (____) _____
3. Are you a U.S. Citizen? Yes No

ACADEMIC

4. High School Name _____

Address: _____

Number, Street

City

State

Zip

Telephone: (____) _____

Type of High School

Public

Private

Parochial

5. Graduating Class Size: _____ Current Class Rank: _____ Date of Graduation: _____
Mo./Year

6. What was your cumulative grade point average? _____

Was this based on a **weighted** or **unweighted** scale? (*circle one*)

Your ACT score? (*Composite*) _____

Your SAT scores? Verbal _____ Math _____

7. Please indicate the college or university you plan to attend and your intended course of study.

8. List your senior courses (1st & 2nd semester)

SCHOOL ACTIVITIES

9. List any leadership positions/offices held. _____

10. List clubs/activities and indicate any offices held. _____

11. List any awards and honors (school, local, state, national). _____

12. List any interscholastic sports participated in and awards received. _____

COMMUNITY ACTIVITIES

13. List any Community Organizations or Volunteer Services (*give us a sense of the time commitment for each service/project.*)

EMPLOYMENT

14. Were you employed during the school year? Yes No

If so, how many hours did you work per week? _____

Indicate the nature of your employment below. _____

REFERENCES

1. High School Administrator or Instructor:

Name: _____

Title: _____ Telephone: (____) _____

2. Family Friend (*over 21, who has known applicant for four or more years*):

Name: _____

Title: _____

Telephone: (____) _____

3. Employer (*if any*):

Name: _____

Company Name: _____

Telephone: (____) _____

IMPORTANT!!!

Attach an essay, up to two pages in length, double-spaced on the following:

John Keats said, "Even a proverb is no proverb until your life has illustrated it."

Please tell us about an experience in your own life which illustrates a proverb, maxim or quote that has meaning to you.

TO BE COMPLETED BY SCHOOL PRINCIPAL OR ACADEMIC ADVISOR

I have reviewed the applicant's responses and certify that they are correct insofar as I know and the school records indicate. I have enclosed an **official High School Transcript** for the applicant.

Signature _____ Date _____

Name/Title _____

SAT/ACT high school code: _____

CERTIFICATION

Important: Review this information and make certain that you have responded accurately to all items.

I certify that all the statements made in this application form are true, complete and correct to the best of my knowledge and belief, and are made in good faith.

Applicant's
Signature _____ Date _____

All applications and necessary forms should be mailed to:

**FACT
2009-2010 SCHOLARSHIP PROGRAM
P.O. BOX 104
EDWARDSVILLE, IL 62025**

Direct any questions concerning the program to that same address — or call 1-800-872-3228.

AUTHORIZATION TO RELEASE PERTINENT RECORDS

This is to authorize the FEDERATION OF AMERICAN CONSUMERS AND TRAVELERS to obtain any scholastic records pertinent to the awarding of scholarship funds. If I am the recipient of this scholarship, I further authorize FACT to obtain any scholastic records pertinent to the determination of my continuing eligibility to receive these funds.

Name of Student _____

Signature _____ Date _____

Name of Parent or Guardian _____

Signature _____ Date _____

MEMBERSHIP VERIFICATION (To be completed by the FACT Member)

Name of Member _____

Name of Applicant _____

Relationship to Applicant (*Must be immediate family member*) _____

Membership # _____

I certify that the information given above is accurate.

Member's Signature _____ Date _____