



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 "IN-SCHOOL" SCHOLARSHIP PROGRAM

1. Only FACT members and their immediate family members may apply.
2. Eligible to apply are students who graduated from an accredited public, private or parochial high school (or equivalent) and are currently enrolled in an undergraduate program in an accredited public or private college or university.
 - 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**
 - Current College Grades
 - 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 "In-School" 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,**
 - a college transcript,
 - an essay, up to two pages, double-spaced.
4. Applicant must be enrolled as a full-time student in a two- or four-year undergraduate degree program at an accredited college or university.

BIOGRAPHICAL INFORMATION

1. Name: _____
Last First M.I. Male Female
Maiden Name: _____
Address: _____
Number, Street & Apt. No.

City State Zip
Telephone (Daytime): (____) _____ SS#: _____
(Home): (____) _____
2. Are you a U.S. Citizen? Yes No

HIGH SCHOOL

3. Name of Last High School Attended: _____

Address: _____
Number, Street

_____ *City* *State* *Zip*

Telephone: (____) _____

Type of High School: Public Private Parochial

Graduating Class Size: _____ Class Rank: _____

Date GED Awarded: _____ Date of Graduation: _____
Mo./Year *Mo./Year*

4. 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 _____

PERSONAL PROFILE

5. College or University you are now attending: _____

Address: _____
Number, Street

_____ *City* *State* *Zip*

Telephone: (____) _____

6. What is your grade point average? _____

7. Course of study or degree you will attain: _____

Current year in school: **Freshman** **Sophomore** **Junior** **Senior** *(Circle one)*

8. List any leadership positions held **in the last two years**. _____

9. List any clubs, student activities, and/or sports participated in, **in the last two years**, and any awards received.

10. List any academic awards and honors received **in the last two years**. _____

11. List any volunteer services, hobbies, interests or recreational pursuits **in the last two years**. (Be sure to give us a sense of the time commitment involved in any volunteer services.)

12. List any academic projects (*research, field work, internships, labs, etc.*). _____

13. Current employer's name and your job description. _____

REFERENCES

1. Past High School Administrator or Instructor (if available):

Name: _____

Title: _____ Telephone: (____) _____

2. Family Friend (*over 21, who has known applicant 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:

Choose a book, written within the past 250 years, that has affected you deeply, and explain why.

-ATTENTION- IN-SCHOOL APPLICANTS

Please enclose an official copy of your
High School Transcript and Current College Records.

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.

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 Applicant _____

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 _____