

HELLENIC TIMES SCHOLARSHIP FUND ANNOUNCING SCHOLARSHIPS FOR THE YEAR 2009

APPLICATIONS MUST BE POSTMARKED BY
FEBRUARY 19, 2009

Transcripts may be forwarded from your schools
any time up until March 1, 2009.

It is the APPLICATION that is needed
by FEBRUARY 19, 2009

For an application, visit our Website at HTSF.org or E-Mail at HTSFund@aol.com

GUIDELINES:

1. Applicants must be enrolled in an accredited College or University for the academic year 2008-09. Proof may be required. Applicants may be graduate or undergraduate students.
2. **Applicants must be of Greek descent, and between the ages of 17 and 25 as of May, 2009.**
3. Applications must be postmarked by **February 19, 2009**. You will receive notification that we received your application by mail. Decisions will be made shortly thereafter by The Hellenic Times Scholarship Committee. Awards will be presented at the Annual Scholarship Dinner Dance.
4. **Students receiving a full scholarship from any other source, or a partial scholarship exceeding 50% of their annual tuition, are ineligible.**
5. Scholarships will be awarded on the basis of necessity and merit. All decisions are final.
6. Applicants must submit official school transcripts and are required to submit a copy of tax returns. Winners are required to submit a copy of their Bursar tuition bill.
7. Applicants may be requested to be interviewed by a member of the Hellenic Times Scholarship Committee.
8. Employees of the **Hellenic Times** and their families are not eligible.
9. The Hellenic Times reserves the right to amend these guidelines.
10. **PLEASE DO NOT RETYPE OR REFORMAT THE SCHOLARSHIP APPLICATION.**
11. Past Scholarship Recipients are **NOT** eligible to apply.

2008-2009 HELLENIC TIMES SCHOLARSHIP FUND APPLICATION

(Please Print Clearly AND Answer all questions completely, if not applicable enter NA in space provided)

Name: _____ Birth Date: _____
 Address: _____ Place of Birth: _____
 City: _____ State: _____ Zip _____ Email Address: _____

where you can be reached: () _____ Home Phone # () _____

1. EDUCATION (official transcripts required)

HIGH SCHOOL	COLLEGE	GRADUATE SCHOOL
School: _____	School: _____	School: _____
Address: _____	Address: _____	Address: _____
Grade Point Average: _____	Grade Point Average: _____	Grade Point Average: _____
Dates Attended _____	Dates Attended _____	Dates Attended _____
Class Standing _____	Class Standing _____	Class Standing _____

2. AWARDS (Specify year):

AWARDS- HIGH SCHOOL	AWARDS-COLLEGE	AWARDS-GRADUATE SCHOOL
Year: _____ Award: _____	Year: _____ Award: _____	Year: _____ Award: _____
Year: _____ Award: _____	Year: _____ Award: _____	Year: _____ Award: _____
Year: _____ Award: _____	Year: _____ Award: _____	Year: _____ Award: _____

3. SCHOLARSHIPS:

SCHOLARSHIPS- HIGH SCHOOL	SCHOLARSHIPS- COLLEGE	SCHOLARSHIPS- GRADUATE SCHOOL
Year: _____ Amt\$: _____	Year: _____ Amt\$: _____	Year: _____ Amt\$: _____
<input type="checkbox"/> Renewable <input type="checkbox"/> Non-Renewable	<input type="checkbox"/> Renewable <input type="checkbox"/> Non-Renewable	<input type="checkbox"/> Renewable <input type="checkbox"/> Non-Renewable
Year: _____ Amt\$: _____	Year: _____ Amt\$: _____	Year: _____ Amt\$: _____
<input type="checkbox"/> Renewable <input type="checkbox"/> Non-Renewable	<input type="checkbox"/> Renewable <input type="checkbox"/> Non-Renewable	<input type="checkbox"/> Renewable <input type="checkbox"/> Non-Renewable

4. (a) EXTRACURRICULAR ACTIVITIES: (List all school, church and/or civic activities, positions held and dates involved.)

Activity	Position	Date(s)

(b) HOBBIES/INTERESTS: _____

5. FINANCIAL NEED:

PARENTS(S)' GROSS ANNUAL INCOME (Please attach copy of parents and students most recent tax return)

2007 \$ _____ OR 2008 \$ _____ (include investments or other sources of income)

A. Father's name: _____ Employed By: _____

Occupation/Position _____ Salary Per Year(USD) \$ _____

B. Mother's name: _____ Employed By: _____

Occupation/Position _____ Salary Per Year (USD) \$ _____

C. Student Gross Annual income. (include your spouses income if married). \$ _____
(please attach copy of tax return):

D. How much is your: 1) Annual Tuition: \$ _____ Room & Board (if applicable): \$ _____

6. HOW MANY CHILDREN ARE CURRENTLY ATTENDING SCHOOL IN YOUR FAMILY (excluding you)?

Relationship/Name	School Attending	Tuition \$
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

7. DO YOU RECEIVE EDUCATIONAL FUNDS FROM ANY OF THE FOLLOWING SOURCES?

No Yes* (Please specify)

*If YES, please indicate type & amount of aid, and period during which aid is applicable, and whether aid is renewable.

STUDENT LOANS			
Source: _____	Subsidized \$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable
Source: _____	Subsidized \$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable
Source: _____	UnSubsidized \$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable
Source: _____	UnSubsidized \$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable

GRANTS			
Source _____	\$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable
Source _____	\$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable

Scholarships: (Specify whether renewable or not/amount/year)			
Source _____	\$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable
Source _____	\$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable
Source _____	\$ _____	Year(s) _____	<input type="checkbox"/> Renewable <input type="checkbox"/> Non Renewable

Financial Aid: Other Sources: _____

8. WORK EXPERIENCE:

(list any jobs you have held - If still working put "present")

JOB	DATES/YEAR	HOURS/ WEEK	If still working provide Telephone Number and Supervisor Name.
_____	<input type="checkbox"/> PRESENT _____	_____	_____
_____	<input type="checkbox"/> PRESENT _____	_____	_____
_____	<input type="checkbox"/> PRESENT _____	_____	_____
_____	<input type="checkbox"/> PRESENT _____	_____	_____

9. WHAT ARE YOUR FUTURE PLANS? (Please write minimum 100 words and maximum 200 words)
Use back of this page or use separate piece of paper.

10. WHY ARE YOU APPLYING FOR THE HELLENIC TIMES SCHOLARSHIP?

11. OTHER RELEVANT INFORMATION (ie: financial or personal hardship, goals, etc.):

12. Please complete the following statement: If selected as a Hellenic Times Scholarship Recipient...

13. PLEASE SUBMIT ONE LETTER OF RECOMMENDATION (Must be submitted with application).

LETTER SUBMITTED BY

PHONE NUMBER

14. HOW DID YOU HEAR OF THE HELLENIC TIMES SCHOLARSHIP FUND?:

15. ETHNIC ORIGIN/WHAT PART OF GREECE IS YOUR FAMILY FROM? _____

16. HAVE YOU EVER APPLIED TO THE HTSF? (circle one) YES NO

The Hellenic Times Scholarship Committee requires the submission of official transcripts. Applications must be signed and postmarked by February 19, 2009. If selected as a winner, I agree to submit the following: 1) Bursar/Tuition Bill
2) Official School Transcript.

I agree that any decisions reached by the Scholarship Committee are final.

Signature _____ Date _____

**Hellenic Times Scholarship Fund-823 Eleventh Avenue-New York, N.Y. 10019-3535
Attn. Nick Katsoris Tel. (212) 333-7456 or (212) 986-6881 Fax.: (212) 977-3662**