

## The Hawaiian Civic Club of Honolulu Post-Secondary Scholarship Application Form P.O. Box 1513 • Honolulu, Hawai'i 96806

Applicant's Name:	ddle initial(s)		
Social Security Number:			
Permanent Address in Hawai'i:			
Current mailing address (if different from	above):		
Hawai'i phone number:	E-mail address:	[please print legibly]	
Hawai'i contact other than applicant:			
High School Name:	(Include name, address and ph Year Grad	one number) duated:	
College or University: (Name of institution in which you ARE en	Projected this colle	or Actual Graduation date from ge/university:	
which you PLAN to enroll in FALL 2010	)		
Major field of study in 2010:(Projected or actual)		Type of Degree in 2010: (i.e., Associate, BA, Master)	
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PLEASE ANSWER THE FOLLOWING:  1. Are you a paid member of the Hawaiian  2. Are you a relative of a member of the Hawaiian  3. If you circled YES, please provide the Hawaiian		Circle one: YES NO Circle one: YES NO ionship to this member:	
(Member's Name)	(Relationship	)	
<ul><li>4. Have you received an HCCH scholarsh</li><li>5. If so, what year(s)?</li></ul>	ip before?	Circle one: YES NO	
<ul> <li>representatives of the Hawaiian Civic Cl</li> <li>to give the Hawaiian Civic Club of Honoschool(s) in which I am enrolled and/or</li> </ul>	quired to support my application at the reduber of Honolulu;  Solulu the right to obtain any necessary and have been enrolled to make a determination and essay as deemed necessary by the	quest of the appropriate, designated d appropriate information from the on of satisfactory academic progress;	
If I am chosen as a recipient of a scholarshicivic Club of Honolulu (HCCH). As a Scholar as a recipient until I cease being a receiving HCCH's newsletters to learn abocivic responsibilities in our community by	cholarship member, no membership du scholarship member. I will have no v ut the activities of HCCH so that one d	es will be required of me during my oting rights. I have no objection to	
Applicant's signature	 Date		