



BANK OF GUAM
2016 \$10,000 IFIT SCHOLARSHIP PROGRAM
 APPLICATION FORM

IDENTIFICATION	Last Name	First Name	Middle Name	Date of Birth
	Home Address	Street	City	State Zipcode
	Home Phone Number ()	Cell Phone Number ()	Place of Birth	U.S. Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
	Email Address	Branch/School You Received Application	Social Security Number	

HOUSEHOLD INFORMATION	Name (Father/Male Guardian)	Name (Mother/Female Guardian)	
	Home Address	Home Address	
	Occupation	Occupation	
	Employer	Employer	
	2015 Yearly Income	2015 Yearly Income	
	List all other dependents in your household		
Name	Age	Relationship	College if enrolled
1. _____			
2. _____			
3. _____			
Special Circumstances (Please be specific)			

EDUCATION	High School(s) Attended: List in chronological order all schools attended during the last two (2) years.			
	School	Location	Date of Attendance From	To
	School	Location	Date of Attendance From	To
	SAT or ACT Score SAT ACT	Cumulative GPA	No. of Honors/AP Courses Taken in High School	
	4-year College(s) to which You have Applied for Admission			
Name of School	Location	Field of Study	Have You been Accepted?	
1. _____			<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. _____			<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. _____			<input type="checkbox"/> Yes <input type="checkbox"/> No	

EMPLOYMENT	Employment History: Complete fields beginning with most recent employer:				
	Position	Business Name	Business Address	Term of Employment	Hours worked per week
	1. _____			Start End	
	2. _____			Start End	
	3. _____			Start End	
4. _____			Start End		

STATEMENT OF UNDERSTANDING

I certify that everything I have stated and reported in this application is correct to the best of my knowledge at this time. I understand that Bank of Guam® will retain this application and its enclosures whether or not I am successful in receiving a grant. I further agree that the decision of Bank of Guam® and the Bank of Guam® Ifit Scholarship Selection Committee will be final.

Signature of Applicant _____

Date _____

Signature of Parent/Guardian _____

Date _____