



# ALPHA-1 FOUNDATION

## 2019 Educational Scholarship Application For career changers and returning adult students

### Personal Information

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Last Name                                      First Name                                      Middle Name

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Name of Related Alpha                      Relationship to Applicant

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Address

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City    State    Zip

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Telephone                                      E-mail

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Applicant Birth Date

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Annual Family Income from All Sources

### Educational Information

Year in College During Coming Year:

Freshman    Sophomore    Junior    Senior    Graduate    Other: \_\_\_\_\_

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College You are Planning to Attend

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Address of College (City, State)

Full-time Student:    Yes    No   (If No, give number of credits: \_\_\_\_\_)

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Major or Course of Study

**Please submit the completed application and all attachments to our office by April 1, 2019:**

*Mail to:* RE: Educational Scholarship Application ATTN: Kim Caraballo  
Alpha-1 Foundation, 3300 Ponce de Leon Blvd, Coral Gables, FL 33134

*Or Email to:* [a1fcommunications@alpha1.org](mailto:a1fcommunications@alpha1.org) with "Educational Scholarship Application ATTN: Kim Caraballo"  
in the Subject line



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**Work Experience:** Using only the space provided below, list your paid work experience during the past four years, beginning with your most recent position.

Employer	Nature of Work	Dates

**Service to the Alpha-1 Community:** Please describe. Use additional paper, if necessary.

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**Attachments:** Your application MUST include the following attachments:

- 1) A copy of your high school transcript if you are going to begin college for the first time, or a copy of your most recent transcript if you are a continuing student
- 2) A copy of your ACT/SAT scores
- 3) Documentation of high school or college GPA
- 4) A 500-word essay on the theme "Lessons learned from Alpha-1"

**Deadline:** Applications must be submitted by **April 1, 2019** to be considered. Please submit only one application; **Only one application is necessary** to be considered for all available scholarships. For assistance, please contact Kim Caraballo at (877) 228-7321 ext 323 or e-mail [kcaraballo@alpha1.org](mailto:kcaraballo@alpha1.org).

**Certification:** I hereby affirm that the information provided on this form is accurate and complete to the best of my knowledge.

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Signature

Date

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