

## Armenian Youth Federation – Western United States Nanor Krikorian Memorial Scholarship

The AYF Nanor Krikorian Memorial Scholarship is awarded annually to ambitious Armenian students who exemplify high quality work ethic, academic excellence, dedication to public service, and passionate involvement in the Armenian community.

An applicant must either be a graduating high school student or an undergraduate student currently attending a college/university in the United States. Applications are not restricted to California residents or AYF members.

Four scholarships are granted to high school seniors, including one \$1000 scholarship, one \$500 scholarship, and two \$250 scholarships. Two \$500 scholarships are awarded to current college students.

The Armenian Youth Federation, a grassroots, social justice organization, was founded in Boston in 1933 by General Karekin Njdeh, with the purpose of advancing the moral, social, and intellectual development of Armenian youth. With a legacy of over eighty years of community involvement and organizational structures in over 17 regions around the world, the AYF stands prepared to play a leading role in the preservation and advancement of the Armenian nation.

This scholarship is dedicated to the memory of AYF member, Nanor Krikorian, who tragically lost her life at a young age to cancer. A completed application form with all supplementary documents must be received by **April 30**<sup>th</sup>.

No application postmarked after April 30th will be accepted. Please attach all required documents and mail them to **104 N. Belmont Street, Suite 313, Glendale, CA 91206** OR submit a scanned PDF online at <u>http://ayfwest.org/programs/scholarship/</u>. For questions or more information regarding the Nanor Krikorian Memorial Scholarship, please contact the AYF office at (818) 507-1933 or <u>educational@ayfwest.org</u>.

## **Application Form**

### Personal Information

	Middle:	Last Name		_ Sex: Male/Female
Address:		City:	State:	Zip:
Phone Number: ()	[	Email:	Date of Birth:	Age:
Name of Parent(s)/Guardiar	l(s):			
Guardians' highest educatio	n:			
Education				
Please fill all applicable sect scholarship finalists.	ions below reę	garding your education. Tr	anscripts may be re	quested from
High School:		Year of Graduation/Ex	pected:	_ GPA:
College/University Attending	J:	Year of Graduation/Ex	pected:	_ GPA:
Major(s):	Degree:	Begin Date:	End Date	e (exp.):
Please list awards or accola	des you have	received (if applicable):		
Experiences				
List experiences you ha organizational involvements Organization Name:	that best dem	nonstrate your work ethic, Position:	diverse interests and	dedication.
List experiences you hat organizational involvements	that best dem	nonstrate your work ethic, Position: City:	diverse interests and	d dedication.
List experiences you ha organizational involvements Organization Name: Address: Name of Supervisor: Begin Date:	that best dem End Date: _	onstrate your work ethic, Position: City: Email Address:	diverse interests and	2 dedication. Zip: umber:
List experiences you ha organizational involvements Organization Name: Address:	that best dem	onstrate your work ethic, Position: _ City: _Email Address:	diverse interests and	d dedication.
List experiences you ha organizational involvements Organization Name: Address: Name of Supervisor: Begin Date: Duties:	that best dem	enonstrate your work ethic, Position: _ City: Email Address: Position: _	diverse interests and	d dedication.
List experiences you ha organizational involvements Organization Name: Address: Name of Supervisor: Begin Date: Duties: Organization Name:	that best dem	ionstrate your work ethic,   Position: _   City:   Email Address:   Position: _   City:	diverse interests and State: Phone No	d dedication.
List experiences you ha organizational involvements Organization Name: Address: Name of Supervisor: Begin Date: Duties: Organization Name: Address:	that best dem	ionstrate your work ethic,   Position: _   City:   Email Address:   Position: _   City:   City:   City:   Email Address:   Email Address:	diverse interests and State: Phone No	d dedication.

Organization Name:		Position:				
Address:		City:	State:	Zip:		
Name of Supervisor:		Email Address:		Phone Number:		
Begin Date:	End Date:					
	Position:					
Address:		City:	State:	Zip:		
Name of Supervisor:		_Email Address:	Phone Nun	nber:		
Begin Date:	End Date:					
Duties:						
		Position:				
Address:		City:	State:	Zip:		
Name of Supervisor:		_ Email Address:	Phone Nun	nber:		
Begin Date:	End Date:					

#### <u>Essay</u>

Submit a paper (not exceeding 1000 words) answering the following prompt: What is an issue you see facing Armenia and/or the Diaspora today? How do you think you can utilize your college degree and/or your career plans to help resolve that issue?

#### **Recommendations**

Please list recommenders (not relatives), their contact information, and their relation to you, who have knowledge about you character, experience, and work ethic. All letters of recommendation must be mailed in with your application packet. Two letters of recommendation are required; one from an academic instructor/advisor and one from a community representative.

Name of Recommender: _	Email Address:	Relationship:	
Name of Recommender:	Email Address:	Relationship:	

#### All applicants must complete and sign the statement below:

have completed this application truthfully with the knowledge and information to the best to my ability. I understand that any award, compensation, notices, contracts, and / or prizes may be rescinded and / or canceled if any of the items in the application were falsified intentionally or negligently. I further understand and agree that the Armenian Youth Federation (AYF) will further research any and all information provided by me in the application or verbally during any interview process. I give permission to the Armenian Youth Federation (AYF), its members, agents, employees, principles, any and all affiliated organizations, and/or representatives to investigate, question, implore, research and / or verify the information provided in the application or any interview process. I further understand and agree not to hold responsible or liable the Armenian Youth Federation, its members, agents, employees, principles, any and all affiliated organizations, and / or representatives for any damages, special or general, that may be caused or resulted from any compensation, notices, promises, and /or monies provided by the Armenian Youth Federation or information contained within this application. Finally. I understand that I have provided no consideration in exchange for the scholarship or community services provided by the Armenian Youth Federation (AYF), its members, agents, employees, principles, any and all affiliated organizations, and/or representatives.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Additionally, all high school applicants under the age of 18 must have the statement below completed and signed by a parent/guardian:

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_