

## Polish American Arts Association

## 2024 ANNUAL SCHOLARSHIP GRANT APPLICATION

Name			
First	Middle	Last	
Resident Home Address			
City	· · · · · · · · · · · · · · · · · · ·	State	Zip Code
College or University			
College Address			······
Telephones (personal/cell)	h	ome	
Email	Citizenship		
Year of school at time of application	<b>on</b> (Freshman, Soph	nomore, Junior, S	Senior, Graduate)
Areas of Study Major	·	Minor	
Projected Date of Graduation	Prospe	ective Degree _	
Applicant's Signature		Date	<del>-</del>

Please note that if you are currently a high school senior, you are not eligible to apply

Send application form with all materials to:

Mary Beth Sowa, PAAA Scholarship Chair: <a href="mailto:sowamb@gmail.com">sowamb@gmail.com</a>