

Application Form
for
AFTRA/Dan Mallinger Memorial Fund Scholarships
625 Stanwix St., Suite 2007
Pittsburgh, PA 15222
(412) 281-6767

Name of Scholarship Applicant

Date: _____ Date of Birth _____ M___ F___

Name: _____

Address: _____

Address: _____

Address: _____

Phone Number: _____

Are you eligible as: AFTRA member _____ Dependant Child of member _____

Name of member as registered at AFTRA: _____

Social Security Number: _____ Parent Union: _____

Dates of AFTRA Membership: From _____ To _____

AFTRA local: _____

Occupation of Parents: Father _____ Mother _____

Ages of: Sisters _____ Brothers _____

Are you applying as a: freshman___ sophomore___ junior___ senior___ post-graduate ___

In which field: academic___ performing arts___ labor relations___ broadcast journalism___

What is your career objective? _____

List the colleges or professional schools to which you have applied in order of preference and state tuition fees for each:

Indicate which, if any, have accepted you: _____

Do you intend to be a full-time student? Yes___ No___

Describe the program you intend to follow: _____

For performing arts and broadcast journalism applicants only:

1. If you are currently in a school or department of performing arts or broadcast journalism, state its name and duration of your attendance:

2. If you, as a performer or broadcast journalist, have had work experience and/or professional credits, please list:

Have you served in the Armed Forces? _____

Are you entitled to and have you obtained any educational benefits? If so, please explain:

How much scholarship aid do you require? _____

What other scholarship applications are you making? _____

What scholarships have you received?

State all other means by which you intend to finance your college education (loans, aid from parents and/or relatives, part-time work, savings, etc.):

PLEASE NOTE:

1. A separate Advisor's Form is required from all applicants.
2. Performing arts applicants are required to submit, in addition, two letters of recommendation from professionally knowledgeable persons in the field of performing arts.
3. **YOU MUST INCLUDE A TRANSCRIPT OF YOUR HIGH SCHOOL OR COLLEGE RECORDS.**
4. You must also include an original essay of not less than 150 words on one of the following subjects:
 - a) a person, living or dead, who has had a profound influence on your life and development
 - b) an experience which has had a profound influence on your life and development
 - c) the significance to you of a higher education

5. **PREFERENCE IS GIVEN TO THOSE WITH FINANCIAL NEED. YOU MUST SUBMIT APPROPRIATE EVIDENCE OF FINANCIAL NEED. (See application guidelines for details.) ALL INFORMATION WILL BE HELD STRICTLY CONFIDENTIAL.**

IN ORDER TO SIMPLIFY PROCESSING OF YOUR APPLICATION, WE REQUIRE YOUR NAME IN THE UPPER RIGHT-HAND CORNER OF THE TAX RETURN. (There may be different names in the same family).

7. **BEFORE MAY 1st, SEND APPLICATION FORM AND ALL OTHER REQUIRED INFORMATION TO: AFTRA/DAN MALLINGER MEMORIAL SCHOLARSHIPS, 625 Stanwix St., Ste. 2007, Pittsburgh, PA 15222**