

# FINANCIAL PLANNING ASSOCIATION OF CENTRAL OHIO SCHOLARSHIP FUND APPLICATION FORM

## PERSONAL INFORMATION

|                 |  |
|-----------------|--|
| <b>Name:</b>    |  |
| <b>Address:</b> |  |
| <b>Phone:</b>   |  |
| <b>Email:</b>   |  |

## ACADEMIC INFORMATION

|                     |  |                   |  |  |  |
|---------------------|--|-------------------|--|--|--|
| <b>Major:</b>       |  |                   |  |  |  |
| <b>University:</b>  |  |                   |  |  |  |
| <b>Overall GPA:</b> |  | <b>Major GPA:</b> |  | <b>Number of Hours Completed in Major:</b> |  |

## RECOMMENDATION(S)

|  |  |
|--|--|
| <b>Name(s):</b>  |  |
| <i>Please list name(s) of professors providing recommendations and attached them to this form.</i> |  |

## EXTRACURRICULAR ACTIVITIES

|  |  |
|--|--|
|  |  |
|--|--|

## ESSAY

Please attach an essay that addresses the following:

How do you expect to apply your field of knowledge in the financial planning industry to meet the financial and lifestyle needs of future clients? Please also articulate what rewards you expect to receive in return for your part in these relationships.

## SIGNATURE

|              |  |              |  |
|--------------|--|--------------|--|
| <b>Name:</b> |  | <b>Date:</b> |  |
|--------------|--|--------------|--|