

CROATIAN BENEVOLENT ASSOCIATION

SCHOLARSHIP APPLICATION - 2024

APPLICANT INFORMATION

Name:		
Address:		
City:	State:	ZIP Code:
Email:		
High School:	GPA:	ACT/SAT Score:
College:	GPA:	Semester Hours:
Current CBA Member?	If not a CBA member, CBA Member Sponsor:	

CROATIAN DESCENT

Eligibility is limited to applicants of suitable Croatian descent. Please identify and explain all persons or other information that support your status as Croatian or of Croatian descent:

PAST SCHOLARSHIP INFORMATION

Have you ever received a CBA Scholarship? If so, please identify each year that you received a scholarship:

SELECTION CRITERIA¹

Applicants will be considered based on the following criteria, in order of importance: (1) Involvement in the Croatian-American community; (2) Academic achievement; and (3) Community service, extracurricular activities, and volunteer activities. Please identify and explain all supporting information and reasons that should be considered by the CBA in selecting you under these criteria:

ATTACHMENTS

Please attach a final school transcript containing a complete transcript of all grades earned for the preceding school year and demonstrating full time enrollment for the preceding year. If applicable, please also attach a copy of any ACT and/or SAT scores. By signing this Application, you attest that the statements, transcript(s), and other information are true and correct to the best of your knowledge. By signing this Application you also agree to comply and be bound by the CBA 2024-25 College Scholarship Program Rules & Eligibility Requirements.

Signature of applicant:	Date:
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¹ Please refer to the CBA 2024-25 College Scholarship Program Rules & Eligibility Requirements for a complete description of all eligibility and selection requirements and considerations.