

BESS ROCES SCHOLARSHIP APPLICATION

_____ have read and understand the conditions of the Bess Roces Scholarship fund explained in the current Cover Announcement. I affirm the information contained herein is true and accurate to the best of my knowledge and belief.

Please fill out the below scholarship application and submit with signature to info@celaphontus.com.

If you have any questions regarding the application form, or the application process, please send questions independently to info@celaphontus.com.

Date _____ Signature _____

Name in full
(Print/Type) _____
Last Name First Name M.I.

Address _____
Number, Street, and Apartment Number

Telephone _____

E-mail address _____

Must be 21

Please confirm that you are over 21 _____

What is the basis upon which you are applying for this scholarship, eg.: Economic need, Disadvantaged circumstances, etc. Please also include your reason for attending the event (Talk, Seminar or Workshop)

Signature: _____ Date: _____