



JAA GENERAL SCHOLARSHIP APPLICATION

Full Name:				
Last		Middl	e	First
Full Name in Kanji:				(if applicable)
Home Address:				
Street:				Apt:
City:			_State:	Zip:
E-mail Address:				
Home Telephone	:			
Applicant's Cell	Phone:			
Place of Birth: _			_ Date of I	Birth:
Father's Name:_			_ Occupat	ion:
Mother's Name:			_ Occupat	tion:
JAA Member?		Name of Member: Please call JAA (212)		

Name:
Address:
Scholastic Honors received:
High School Extracurricular Activities:
Other Extracurricular Activities (e.g. community service, volunteer work, clubs, or jobs):
U.S. College or University to which you intend to enroll (indicate whether accepted or if the
application is pending):
Please describe any special circumstances, financial or otherwise, which you would like us to consider or know about you:

Please attach additional sheets if needed. Please make additional copies if needed.