SCHOLARSHIP APPLICATION

THE NORMAN L. FULD AND RENEE G. FULD SCHOLARSHIP TRUST FUND

The Norman L. Fuld and Renee G. Fuld Scholarship Trust Fund provides scholarships on a nondiscriminatory basis to students attending colleges of the City University of New York. Preference will be given to physically handicapped students. Please complete this application and submit it to The Norman L. Fuld and Renee G. Fuld Scholarship Trust Fund, c/o Gary M. Krim, Trustee, 1311 Mamaroneck Avenue, Suite 340, White Plains, NY 10605, with a copy of your high school and/or college transcript and two letters of recommendation.

Name:	
Address:	
Telephone number:	
E-mail address:	
High School Graduation Date:	
Cumulative Grade Point Average:	
College that you attend or intend to attend:	
Describe your major or intended field of study:	

1. Describe any particular challenges you have overcome in preparing yourself to attend college. If you have any physical handicap, please describe:

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2. List your extracurricular activities (e.g., student government, sports, publications, school sponsored community service programs, student-faculty committees, arts, music, etc.):)l-
3. List any public service and/or community activities you have participated in and what you have gained from doing so (e.g., homeless services, environmental protection, advocate activities, etc.):	
4. List any awards, scholarships, grants, publications or special recognitions you have receive (for awards and grants include the amount):	ed
5. List the names of the persons providing your letters of recommendation and how they kno you:	W
6. Estimate your expected cost for your education, including books and fees, net of oth scholarships and grants listed in item 4, for the upcoming academic year:	er

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7. Provide any additional informat	ion you deem relevant:
I hereby certify that all the informa	tion included above is true.
Applicant's Signature	Date