



ALEX BUCK SCHOLARSHIP APPLICATION

All information will be kept confidential.

Name of Junior Ambassador _____

I/we request a grant of \$_____ * for the Junior Ambassador trip to
(city & country) _____ in (year of trip) _____.

Father/Guardian Name	Address	Phone
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Father's Employer	Address	Phone
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Mother/Guardian Name	Address	Phone
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Mother's Employer Name	Address	Phone
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Income Estimate last tax year (closest thousand) _____

From Employers _____

Assistance-Government/Other _____

Other Income _____

Total _____

You will be contacted by a representative of the Fullerton Sister City Association concerning your application.

* Note that the Sister City does not award scholarships covering the entire cost of a trip. Remember that it is expected that Ambassadors will request funding from friends, relatives, etc. and that they will participate fully in fund raising activities.