City of Berlin Scholarship
of the Checkpoint Charlie Foundation,
Berlin, Germany
Application Form
(as of October 2016)
Please print or type

Last Name, First Name Middle Initial	Social Security No.
Name of parent affected by Sept. 11 attacks	**Unit/Ladder**

Permanent address: _____

_____

Telephone: _____

Email **(VERY IMPORTANT):** _____

Requested dates of scholarship

Initially one year (2 semesters), starting with ☐ fall semester 20____ (fill in the year)
☐ spring semester 20____ (fill in the year)

My program began/will begin on: _____ and last until: _____
(mm/dd/yyyy)   (mm/yyyy)

Name of college/university/trade school: _____

Intended degree/certification and subject/major: _____

Student ID Number (issued by school): _____

Academic status at the beginning of the scholarship (please check one):

BACHELOR	MASTER	TRADE/VOCATIONAL SCHOOL
☐ 1st semester freshman ☐ 2nd semester freshman ☐ 1st semester junior ☐ 2nd semester junior ☐ 1st semester sophomore ☐ 2nd semester sophomore ☐ 1st semester senior ☐ 2nd semester senior	☐ I am currently in semester____ of a _____ semester program	☐ I am currently in semester____ of a _____ semester program

How did you hear about this scholarship? _____

How many siblings do you have? _____   **Age(s):** _____

Has a sibling received a City of Berlin Scholarship in the past? ☐ Yes   ☐ No

If yes, what is his / her name? _____

Are you currently receiving any other scholarships? ☐Yes ☐ No

If yes, which ones and for what amount(s)? _____

_____

What was your parents' combined annual income last year? $ _____

Applicant's current address (if different from permanent address):

_____
_____

Telephone: _____

Address of the college, university or trade school:

_____
_____

Telephone: _____ Fax: _____

Email: _____

Address of the trade school's, college's or university's financial aid office:

_____
_____

Telephone: _____ Fax: _____

Email _____

Name of the school's bank: _____

School's bank account number: _____

ABA Routing Number:_____ SWIFT CODE: _____

In addition, you <u>must</u> include the following with the application, on separate sheets:
- 2 letters of recommendation (including at least one recent teacher/professor/ counselor)
- A 1000 word essay about your knowledge of Germany and German-American relations
- a 1000 word personal statement on how you would benefit from this scholarship, including a brief description of your father's involvement with 9/11.
- proof of a familial connection (your birth certificate <u>and</u> the official death certificate or other documentation of your parent's illness or incapacity connected to the Sept. 11th attacks)
- a letter or other documentation from the NYFD or your parent's current or former employer confirming that he/she was on duty on September 11th and/or at Ground Zero in the days after September 11th.
- an official cost summary from your university or college for the first semester for which funding is requested; a summary for the second semester must be provided to the Checkpoint Charlie Foundation as soon as it is available
- an existing financial aid summary (FSEOG, Federal Pell Grants, etc.) if applicable
- A presentable photo of yourself, ideally a portrait

If you are an upcoming college freshman, please include:
- a letter of acceptance from your future college/university
- an official copy of your high school transcript

If you are currently a college/university student, please include:
- an official copy of your current transcript(a GPA of 3.0 or higher on a 4.0 scale is required)

Applications will be **considered in June and November** but may be submitted in advance. **Only complete applications will be considered.** All application materials should be sent to the following address:

Friends of Firefighters, Inc.
Stephanie Cherry
199 Van Brunt Street
New York, New York 11231
Phone: (718) 643–0980   Fax: (718) 643–1240
www.friendsoffirefighters.org   info@friendsoffirefighters.org

The application form can also be found on the Checkpoint Charlie Foundations website:
www.cc-stiftung.de

I hereby affirm the accuracy of the information provided in this application and have read and understood the terms and conditions of this scholarship.

Signature_____   Date_____