

# Application Checklist (fall 2019)



**FOR A FIRST-TIME APPLICATION** for the City of Berlin Scholarship  
Please include **ALL OF THE ITEMS** in the order listed below in your application file and put this checklist page as the front page of your application file.

**PLEASE NOTE: CCF WILL ONLY ACCEPT applications which are:**

- **COMPLETE (WITH THE CHECKLIST BEING THE FIRST PAGE)**
- **IN A SINGLE PDF FILE** and with documents in the order as listed below
- **in an acceptable form (only scans, no photographs of papers or loose pages)**

Last name, First name: \_\_\_\_\_

Application for semester/academic year: Fall 20\_\_ / Spring 20\_\_

**Application materials:**

- Application form (3 pages)
- Number of siblings \_\_\_\_ Their age/s: \_\_/\_\_/\_\_/\_/\_\_\_
- Proof of a parent's accident disability retirement and/or pension related to 9/11, or proof that a parent died after Sept. 11, 2001 due to an illness related to post-9/11 work at Ground Zero
- If the proof of accident disability retirement is not from the FDNY: proof of current or previous employment by the FDNY
- Copy of parent(s) / - or your own - legal guardian(s) previous year's U.S. Individual Income Tax Return (Form 1040 (here **only** front page and page 2)
- Applicant's birth or adoption certificate
- Two** letters of recommendation

**for incoming college freshman only:**

- Letter of acceptance from future college/university or vocational school
- Copy of transcript of grades for your High School Diploma

**for currently enrolled university/community college students:**

- copy of current transcript of studies
- \_\_\_\_ **GPA (3.0 or higher on a 4.0 scale required)**, please do not apply if your GPA is below 3.0
- Tuition summary or statement \_\_\_\_\_ USD
- Total amount of financial aid \_\_\_\_\_ USD
- Personal statement (approx. 800 words, type size min. 11, max. 2 pages)
- Essay about Germany (approx. 800 words type size min. 11, max 2 pages)
- Acceptable color portrait photo (size like for a passport) measuring at least 600 x 600 pixels (if a scan, please send it as a separate file) or 2.5 x 3.5 inches (if sending the photo as a hard copy)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant signature

***Confirmation of completeness by FoF***

\_\_\_\_\_  
***Date:***

\_\_\_\_\_  
***Signature of FoF representative***



**City of Berlin Scholarship**  
 of the Checkpoint Charlie Foundation,  
 Berlin, Germany  
**Application Form**  
 (as of 2019)  
 Please print or type

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

Permanent address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date of birth (MM/DD/YYYY): \_\_\_/\_\_\_/\_\_\_

My personal E-Mail address (not from one of your parents!) \_\_\_\_\_

**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 degree program began/will begin on: \_\_\_\_\_ and lasts until: \_\_\_\_\_  
 (MM/DD/YYYY) (MM/YYYY)

Name of college/university \_\_\_\_\_

Intended degree/certification and subject/major: \_\_\_\_\_

Student ID Number (issued by school): \_\_\_\_\_

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

BACHELOR	MASTER or comparable
<input type="checkbox"/> 1 <sup>st</sup> semester freshman <input type="checkbox"/> 2 <sup>nd</sup> semester freshman	<input type="checkbox"/> I am currently in semester ___ of a ___ semester program
<input type="checkbox"/> 1 <sup>st</sup> semester sophomore <input type="checkbox"/> 2 <sup>nd</sup> semester sophomore	
<input type="checkbox"/> 1 <sup>st</sup> semester junior <input type="checkbox"/> 2 <sup>nd</sup> semester junior	
<input type="checkbox"/> 1 <sup>st</sup> semester senior <input type="checkbox"/> 2 <sup>nd</sup> semester senior	

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? \_\_\_\_\_

Have you ever received a CBS before? If so, when (from-to) \_\_\_\_\_

Are you currently receiving any other scholarships?  Yes  No

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

\_\_\_\_\_

Your parents' combined adjusted gross income last year? \$ \_\_\_\_\_  
(as stated in their tax return, form 1040 or 1040EZ)

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

\_\_\_\_\_

Telephone: \_\_\_\_\_

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**Address of the college, university or trade school:**

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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**Because CCF is a nonprofit organization and we have to handle money responsibly, we ask you to verify options for transferring the City of Berlin Scholarship directly to your college / university (not using a middle man) in advance:**

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

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email \_\_\_\_\_

Name of the school's bank: \_\_\_\_\_

Bank's address street: \_\_\_\_\_  
city, state, zip \_\_\_\_\_

Bank acct. no., to which tuition payment should be wired: \_\_\_\_\_

ABA Routing Number: \_\_\_\_\_ SWIFT CODE: \_\_\_\_\_

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**In addition, you must include the requested papers/information** as listed in the checklist.  
The checklist has to be the first (front) page.

Please note, that CCF only will accept applications, that are COMPLETE in a proper form and if the application is only one pdf file (no single pages)!! Photographs of documents are not a proper form, please only use scans.

Signature and privacy release

I hereby affirm the accuracy of the information provided in this application and have read and understood the terms and conditions of this scholarship. I hereby grant the Checkpoint Charlie Foundation permission to list my name as a recipient of the City of Berlin Scholarship on the scholarship bear sculpture at the FDNY and to include a brief biography and photograph of me in print and online publications about the City of Berlin Scholarship. I also grant a permission for them to save and process the information that I send to them, in both electronic and analog form, for archival purposes and in order to properly document the proper use of scholarship funds to auditors and other public agencies.

*Note: if you do not consent to some of the privacy terms, please cross them out like this: ~~name~~*

Printed name: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Applications will be **considered in by August 20. ONLY COMPLETE APPLICATIONS (SEE CHECKLIST) WILL BE CONSIDERED.** All application materials should be sent, **in the order listed above and as ONE single .pdf file**, to the following address:

**Friends of Firefighters, Inc.**  
199 Van Brunt Street  
New York, New York 11231  
Phone: (718) 643-0980 Fax: (718) 643-1240  
[www.friendsoffirefighters.org](http://www.friendsoffirefighters.org)      [info@friendsoffirefighters.org](mailto:info@friendsoffirefighters.org)

The application form can also be found on the Checkpoint Charlie Foundation's website:  
[www.cc-stiftung.de](http://www.cc-stiftung.de)