



## Re-Application Checklist

Re-Application form for the City of Berlin Scholarship  
(by 2021)

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

- Re- Application form
- Official tuition summary \$ \_\_\_\_\_ / semester
- 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)
- Copy of current transcript of studies
- \_\_\_\_\_ **GPA (3.0 or higher on a 4.0 scale required) –**  
Please do not apply, if your current GPA is below 3.0)
- Tuition summary or statement \_\_\_\_\_ USD
- Total amount of financial aid \_\_\_\_\_ USD
- Yes, I have reviewed the information that I had provided about my school's bank account for incoming wire payments and confirm that it is correct
- Letter of progress (max. 1 page)  
If you will be transferring or starting a new degree program, please include in addition:
- a letter of acceptance from the university**

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

Your signature \_\_\_\_\_



**City of Berlin Scholarship**  
of the Checkpoint Charlie Foundation,  
Berlin, Germany

**Re-Application Form** (by 2021)

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>

**Requested dates for the scholarship**

This reapplication is for  fall semester 20\_\_ (fill in the year)  
 spring semester 20\_\_ (fill in the year)

**My degree program began on:** \_\_\_\_\_ **and lasts until:** \_\_\_\_\_  
(mm/dd/yyyy) (mm/yyyy)

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

**Applicant's permanent address** (fill out only if it has changed):

\_\_\_\_\_  
\_\_\_\_\_

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

Email (**VERY IMPORTANT**): \_\_\_\_\_

**Applicant's current address, if different from permanent address** (fill out only if it has changed):

\_\_\_\_\_  
\_\_\_\_\_

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

Email (**VERY IMPORTANT**): \_\_\_\_\_

**Name and address of the applicant's university or college:**

\_\_\_\_\_  
\_\_\_\_\_

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

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

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

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:

Information about the school's bank account to which the payment should be wired. Please reconfirm this information with the school, as it may change from year to year:

Account holder: \_\_\_\_\_

College/Universities address: \_\_\_\_\_

street \_\_\_\_\_

city, state, zip \_\_\_\_\_

Account number, to which payment should be wired: \_\_\_\_\_

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

Applicant's student ID or student account #: \_\_\_\_\_

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How many siblings do you have? \_\_\_\_\_ Age(s): \_\_\_\_\_

Has a sibling received a City of Berlin Scholarship in the past? Yes / no

His / her name? \_\_\_\_\_

Are you currently receiving any other scholarships? Yes  No

If so, 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)

Major/program of study: \_\_\_\_\_

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

BACHELOR		MASTER
_ 1 <sup>st</sup> semester sophomore		This fall I will be in semester ___ of a ___ semester program
_ 2 <sup>nd</sup> semester sophomore		
_ 1 <sup>st</sup> semester junior		
_ 2 <sup>nd</sup> semester junior		
_ 1 <sup>st</sup> semester senior		
_ 2 <sup>nd</sup> semester senior		

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.

Applications will be **considered in by August 8, 2021, 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:

Checkpoint Charlie Foundation: [info@cc-stiftung.de](mailto:info@cc-stiftung.de), but include Friends of Firefighters, Inc., [info@friendsoffirefighters.org](mailto:info@friendsoffirefighters.org) on "cc" to inform them about your progress.

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

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