

**DAVID S. ISHII FOUNDATION / YASUKO ASADA MEMORIAL
COLLEGE SCHOLARSHIP APPLICATION**

APPLICATION DEADLINE:
April 13, 2018

Social Security Number (last 4 digits only): ...-...-_____ Date of Birth: _____

Name: _____

First

Middle Initial

Last

State of residency: _____ Country of Citizenship: _____

Sex: _____ Place of Birth: _____

Permanent Hawai'i address: _____

Street number (or PO Box)

City

State

Zip

Home Phone: _____ Cell Phone: _____ Email Address: _____

Temporary or mailing address (if different from permanent): _____

Street number (or PO Box)

City

State

Zip

If you have a temporary address, please give effective dates: from: _____ to: _____

High School: _____ Date High School graduation: _____

Name

City

State/Country

Extra-curricular activities or awards: _____

(Please attach a separate sheet, if necessary)

College/University Planning to Attend: _____

Annual Household Income: (one)

Less than \$25,000

\$51,000 - \$100,000

\$25,000 - \$50,000

More than \$100,000

Athletic Director's signature _____ Printed Name: _____

Did you attach a copy of your essay?

Yes _____ No _____

Did you attach a copy of your high school transcript?

Yes _____ No _____

Did you attach your Letter(s) of Recommendation?

Yes _____ No _____

Send completed Application, Essay, Transcripts and Letter(s) of Recommendation to:

**DSIF SCHOLARSHIP FUND COMMITTEE
P. O. BOX 2927
AIEA, HI 96701**