

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

APPLICATION DEADLINE:  
**April 16, 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**