2017 -2018 Scholarship Program

Children of Persia (COP) was established in 1999 with the objective of promoting the well-being of the disadvantaged Iranian children thru providing healthcare, education, and social services assistance. In 2006, Children of Persia, through its generous donors, started its scholarship program with a focus on assisting students with financial need to meet their goal of attaining higher education. COP truly believes that knowledge is power. Over the years, we have realized that those we help become strong advocates when it comes to helping others and as such, we hope to inspire the younger generation to help themselves and help others through their success. This year, for a third year in a row, we are partnering with the Iranian American Medical Society (IAMS) of Washington Metropolitan Area, to add one additional scholarship with a focus on students in health related fields.

Application Requirements:

Applicants must meet the following requirements to be eligible for the COP Scholarship:

- Be of Iranian descent.
- Be a U.S. citizen or lawfully reside in the United States.
- Demonstrate financial need thru submission of tax returns or other supporting financial documents such as FAFSA and latest bank account statement. The tax return of the parents must be included if the student is claimed as a dependent on their tax returns.
- Attend an accredited college or university in the United States, in a full-time undergraduate, degreed program and have completed at least 15 credit hours. High school students entering for the first semester may be eligible if they have 15 college level credits.
- Demonstrate academic excellence, holding a cumulative GPA of 3.0 or higher, community service activities, and financial need.
- Submit a COMPLETE Scholarship Application package including the required application form, supporting information, and the required documentation. Incomplete applications will be deemed ineligible. Former applicants, who were not granted Children of Persia scholarship, are encouraged to apply. See Application Form for specific requirements. Application Form can be downloaded from the COP web site at http://www.childrenofpersia.org. The application materials, including financial documents, will be handled confidentially by COP.
**Important Application Dates:**

- Application must be post marked by **May 19, 2017** to be eligible for consideration. Application materials, including supporting documentation must be mailed **all together in one package** to:

  
  *COP Scholarship Program*
  
  *P.O. Box 2602*
  
  *Montgomery Village, MD 20886*

- **IMPORTANT NOTE:** Transcripts and letters of recommendation should not be sent separately. Incomplete, e-mailed, or faxed applications will NOT be considered. Selected scholarship recipients will be notified by July 2017 and the names of the successful candidates may be posted on the Children of Persia website and used in other media or informational materials. For questions, please email info@childrenofpersia.org, noting 2017 Scholarship on the subject line.

**Scholarship Conditions:**

- If the applicant is claimed as a dependent on the federal income tax return of another person, then that other person's financial resources will be considered in assessing financial need. Federal tax returns of the applicant, and of any person claiming the applicant as a dependent, must be submitted with the application package.
- Funds will be dispersed directly to the college or university. The scholarship will provide $2,000 for the 2017-2018 academic year - $1,000 each for fall and spring semesters. Spring semester award is conditioned upon the recipient maintaining the GPA requirement of 3.0 and a full-time status, AND forwarding such documentation to COP in the requested time. This Scholarship is for 2017-2018 academic year only. Future programs are dependent upon COP’s evaluation of the community needs and availability of funds.
- The scholarship is not limited to a specific field or career objective, however, with the COP and the Iranian American Medical Society partnership, one applicant in health related fields of study, will be given preference.
- Applications will be screened by an independent panel of distinguished scholars and the finalists may be interviewed by the selection committee. The final selection will be based on meeting the eligibility and application requirements, the completeness of the application package and the interview.
Please type or print in black ink only

☐ I am submitting my application by May 19, 2017 to be considered for the 2017-2018 Children of Persia Scholarship Program.

PERSONAL DATA
(All information must be filled out)

Full Legal Name  
_________________________ ___________________________  __________  
Last                                    First                                    Middle       Male/Female

Permanent Address  ___________________________________________________________________ 
Street  ___________________________________________________________________  
City                                        State                                    Zip  
__________________     __________________        ______________________

Date of Birth                    Home Phone #                   Mobile Phone #

________________________________________________  
E-Mail Address

Social Security Number  ___________-_________-__________

Are you a US Citizen?  ☐ Yes   ☐ No     If no, what is your legal status?__________________

How do you establish your Iranian descent?  ☐ Iranian Father   ☐ Iranian Mother   ☐ Other _______

COLLEGE / UNIVERSITY INFORMATION

Name:  _____________________________________________________________________________  
Address:  ____________________________________________________________________________

Website:_________________________________  Phone: _________________  FAX :______________

Contact:  ____________________   _____________________________________________  
Name  Address                                    Phone

# of College/University Credits Completed ________              Cumulative GPA __________
Please respond to the following questions. Attach your typed responses to this form.

☐ Activities - List your extracurricular, community, employment or other activities in order of their importance to you. Indicate the dates you participated in the activity, positions held and the number of hours per week you spend on each.

☐ Awards - List any significant awards or honors you have received for academic or extracurricular achievements.

☐ Essay - One essay is required. Your essay should be succinct, and no longer than one page single spaced and address both statements below:
  a. Choose the one activity you listed as most important in question #1 and tell us why it is significant.
  b. Explain your financial need. Include any state or federal financial aids that you qualify for.

☐ Recommendations: Two recommendations are required. One recommendation must be from College/University academic professional, with knowledge of your academic and school based activities.

☐ Financial Need -
  c. Submit a copy of FAFSA Federal form showing eligibility for financial assistance and other documentation showing assistance you receive from your college or university. Provide other supporting data to demonstrate your financial eligibility for assistance.
  d. Submit the 2016 Federal tax return of your parents or another person who may claim you as a dependent on their federal income tax return.
  e. Submit your Federal tax returns if you are not claimed as a dependent on other Federal tax return forms.

☐ Transcript - Submit an official and most current transcript showing college/university seal, with the application materials. You must be ready to provide supporting documentation if requested.

TO BE COMPLETED BY PARENT OR GUARDIAN
Incomplete forms will NOT be considered to be eligible

Father/Male Guardian

Name

Address

Occupation

2016 Adjusted Gross Income (IRS 1040)

Estimated Adjusted Gross Income (2017)

Are you being claimed as dependent on your parents/guardians tax returns?  ☐ Yes  ☐ No

Parent’s marital status:  ☐ Single  ☐ Married  ☐ Separated  ☐ Divorced  ☐ Widowed

If applicable, please indicate with whom you reside:

Ages of applicant’s siblings (if applicable) __________________# of siblings attending college next year _______

We certify that the information provided is true and complete to the best of our knowledge. Applicants may be asked to provide information about the non-custodial parent or step-parent financial contributions. If required, we agree to provide proof of this information, including copies of income tax returns. We realize that if documentation is not provided, the applicant may be deemed ineligible for this scholarship.

Applicant’s Signature/Date

Parent or Guardian’s Signature/Date

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