

**Chinese American Faculty Association (CAFA)
2017 CAFA SCHOLARSHIP APPLICATION FORM**

Name: _____

(English)

(Chinese, optional)

Date of Birth ____/____/____ Place of Birth _____ Phone: (____) _____

Fax: _____ Email: _____

Address _____

City _____ State _____ Zip Code _____

College: _____ Date Entered: _____

Major _____ Minor (if any): _____

Class Status (highlight one): Freshman, Sophomore, Junior, Senior Anticipated graduation date: _____

College Units Completed (not including your current courses): _____ semester or quarter units

Overall Grade Point Average _____ on a scale of _____

Extracurricular Activities:

(Attach another sheet if necessary)

Will you attend the banquet on **Saturday, May 6th, 2017** at 6 PM? ___ yes ___ no

Please **email** your complete application packet to Professor Yi Cheng at ycheng2@cpp.edu

no later than noon of **Saturday, April 22, 2017**.

You may visit CAFA website www.cafasc.org for more information and the application form.

For any question, please contact Professor **Yi Cheng**, email: ycheng2@cpp.edu, Tel. (626) 277-9707