

**Armenian Students' Association of America, Inc.  
Application for High School Silver Medal Award**

The Association shall award up to ten (10) Silver Medals to high school seniors who have achieved high scholastic standing in an accredited high school in the United States.

The Association will also pay the sum of twenty-five dollars (\$25.00) to each recipient accepting the award in person at the Annual Convention in order to help defray his/her expenses in attending the Annual Convention.

**Completed applications must be submitted by June 1, 2002.**

All personal information provided by the applicant will be held in strict confidence.

- A. Please type or print application in ink.
- B. Answer every question completely.
- C. Send an official transcript of all your high school grades up to the last completed semester. Please include your official rank in the graduating class and your SAT scores.

1. FULL NAME \_\_\_\_\_

2. ADDRESS \_\_\_\_\_  
(Number and Street)

\_\_\_\_\_ (City) (State) (Zip)

3. DATE OF BIRTH \_\_\_\_\_ TEL. NO. \_\_\_\_\_

4. ARE YOU AN AMERICAN CITIZEN? \_\_\_\_\_

IF NOT, OF WHAT COUNTRY? \_\_\_\_\_

5. LIST THE HIGH SCHOOLS AND PREPARATORY SCHOOLS YOU HAVE ATTENDED IN THE LAST TWO YEARS IN ORDER OF ATTENDANCE.

NAME OF SCHOOL	ADDRESS	DATES OF ATTENDANCE

6. DATE OF GRADUATION \_\_\_\_\_ COURSE OF STUDY \_\_\_\_\_

7. APPROXIMATE:
- a. Enrollment of high school \_\_\_\_\_
  - b. Size of graduating class \_\_\_\_\_
  - c. Percentile in senior class \_\_\_\_\_  
(top 1 %, 2 %, 10%, etc.)
  - d. Rank in graduating class \_\_\_\_\_

8. PLANS AFTER HIGH SCHOOL (INCLUDE COLLEGES OF CHOICE AND MAJOR FIELD OF STUDY)

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9. OF THE ABOVE INSTITUTIONS, WHICH ONE DO YOU EXPECT TO ATTEND? \_\_\_\_\_  
HAVE YOU BEEN ACCEPTED? \_\_\_\_\_

10. INDICATE SPECIAL HONORS, PRIZES AND OTHER SCHOLASTIC RECOGNITION WHICH YOU HAVE RECEIVED INCLUDE DATES: \_\_\_\_\_

11. OF WHAT CLUBS, ORGANIZATIONS (SOCIAL, FRATERNAL AND EDUCATIONAL) ARE YOU A MEMBER? LIST OFFICES YOU HAVE HELD AND INCLUDE DATES:

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12. IF THE COMMITTEE ACTS FAVORABLY ON YOUR APPLICATION, WOULD YOU BE ABLE TO ACCEPT THE MEDAL IN PERSON AT THE ANNUAL AWARDS CEREMONY? \_\_\_\_\_ LOCATION: BOSTON, MA  
DATE: OCTOBER, 2002.

13. INFORMATION SUBMITTED THROUGH \_\_\_\_\_ BRANCH OF THE ASA.  
(if applicable)

14. IN WHAT WAY ARE YOU OF ARMENIAN DECENT? (BE SPECIFIC)

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15.

(Date of Application)

(Signature of Applicant)

MAIL APPLICATION ALONG WITH OFFICIAL TRANSCRIPT TO:

ASA Silver Medal Awards Committee, 333 Atlantic Avenue Warwick, RI 02888 Tel: (401) 461-6114.

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PLEASE DO NOT WRITE BELOW THIS LINE

Transcript Received \_\_\_\_\_ Disposition of Application \_\_\_\_\_

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(Date)

Chairperson, Silver Medal Award Committee  
Member: \_\_\_\_\_