

# Polish National Alliance 2024/25 Scholarship Application

Undergraduate Scholarship Program is available to qualified PNA members who are college Sophomores, Juniors or Seniors.

## Rules and Regulations

### REQUIREMENTS

1. The Applicant must be a beneficial premium paying member in good standing with the PNA for at least three (3) years,  
or
2. The Applicant must be an insured premium paying member in good standing with PNA for at least two years, providing one parent has been an insured member for at least five years. Please provide parents/guardians policy information.
3. Applicants must have a permanent plan of insurance and be current with premiums under the following:
  - Life Paid Up at 90,
  - Life Paid Up at 65,
  - 20 Pay Life,
  - Single Premium Whole Life
4. Annuities and Plan 718 (Modified Life Paid Up at 65) are excluded.
5. **Effective June 2022 ALL scholarship applicants are required to have a minimum of \$10,000 policy to qualify to apply.**

### HOW TO APPLY

1. Complete and sign the application.
2. Include the most recent Official College or University Transcript. Copies, grade reports and computer print outs will not be accepted. If a transcript is not included with the application one must be received by April 15th. Without an official transcript the application is considered incomplete and will be DISQUALIFIED.
3. A recent photo (wallet size 2 x 3 only)
4. **The completed application must be returned to the Polish National Alliance, postmarked no later than April 15, 2024.**
5. In reviewing this application, the Scholarship Committee will take into consideration the Applicant's academic record, educational goals, involvement in PNA, community and college activities. Family PNA involvement and membership will also be taken into consideration.
6. The evaluation will be based on a Cumulative Point System. **A GPA below 3.0 will not be considered.**
7. Scholarships will be awarded for studies and programs only in the U.S. and/or administered by U.S. Colleges and Universities.
8. All Applicants will be notified of the Committees decision in the month of July. All awards will be mailed directly to the College or University where the student will be attending in the fall for tuition only.

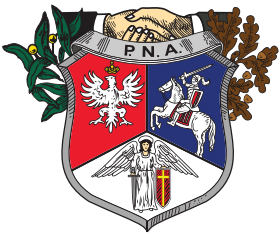
### IMPORTANT

**Providing any false or misleading information on the application may result in permanent disqualification from participation in the PNA Scholarship Program. A recipient must remain a member for a minimum of 5 years after the last award is received. If membership is not retained all awards received must be repaid.**

Application must be submitted to:  
**Polish National Alliance  
Scholarship Committee  
6100 N. Cicero Ave.  
Chicago, IL 60646**

**Deadline: Postmarked by April 15th, 2024**

**Questions?** fraternal@PNA-ZNP.org



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1. Applicant's Name .....  
Last First Name Middle Student ID No.

2. Address .....  
Street address City State Zip

3. Telephone #: ..... Email: .....

4. Date of Birth: ..... Place of Birth: .....

5. PNA Membership Information: Lodge No.: ..... Cert.No.: ..... Date of Entry: .....

6. Name and Address of school you will be attending in the Fall:  
.....  
.....

7. In the Fall semester I will be a:  Sophomore  Junior  Senior

8. Attached with my application is my most recent official transcript:  Yes  No

9. Cumulative Grade Point Average (min 3.0 GPA required) .....

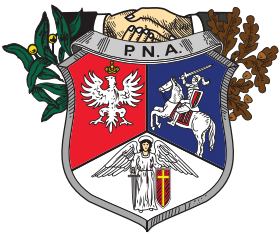
10. Estimated Annual Tuition: \$ .....

11. Applicant's Major: .....

12. PNA Activities (For example PNA dance groups, debutante ball, meetings, etc.): .....  
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13. Polish Language School, Polish or Slavic Courses: .....  
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14. Academic Achievements, Awards (dean's list, honor roll, National Honors Society, etc.). Please attach copies if possible.  
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15. **Community, civic involvement, including other organizations, church, school activities and other volunteer service.**  
List your activities, awards, accomplishments etc. If possible, please attach letters of recommendation, copies of awards etc.

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16. **Have you previously received a scholarship from PNA?**  Yes  No

If yes, what year? ..... What amount? \$.....

17. **Father's or Guardian's name:** .....

Is he a PNA member?  No  Yes Certificate Number: .....

18. **Mother's or Guardian's name:** .....

Is she a PNA member?  NO  Yes Certificate Number: .....

19. **Parental, grandparental PNA involvement:** .....

.....  
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20. **Number of children in the family (including yourself):** ..... **Are they PNA Members?**  Yes  No

Name: ..... Age: ..... Certificate Number: .....

Name: ..... Age: ..... Certificate Number: .....

Name: ..... Age: ..... Certificate Number: .....

Name: ..... Age: ..... Certificate Number: .....

**If awarded a scholarship, I, ....., pledge to sustain my PNA membership for a minimum of five years following the issuance of the award. Should I cease to be a member within this five-year period, I undertake to repay the entire scholarship amount to the PNA.**

Applicant Signature: ..... Date: .....

**This application for scholarship is submitted with full knowledge of the Rules and Regulations governing the program. If a scholarship is awarded, the Recipient is bound to abide by these rules.**

Applicant Signature: ..... Date: .....