

CHUNG HWE PARK CHARITY FOUNDATION

www.chpcharityfoundation.org

인 형서 (Application Form)			
Full Name(English):		Male()	Female()
성명(Korean):		Place of Birth:	
e-mail:			
Address:			
Phone No	Home:	Other:	
Date of Birth			Social Security Number
Name of School			Grade()
Address:			
Family Status			
Please complete	I live with: father () mother() other()		
	Are both parents living ?(Please explain if necessary)		
Name of father:		Name of Mother:	
Names of siblings:			
Who is supporting school expenses:	Name:	Relation:	
EDUCATION			
Are you planing to go to college ? Yes() No() If yes;			
What would you like to major:			
Have you received scholarship from CHPCF before ? Yes() No()			
If yes, please indicate		date:	
Extracurricular Activities:			
All information above are true and correct to my best knowledge.			
Signed by:		Date:	