

APPLICATION
SOCIETY CFA® SCHOLARSHIP PROGRAM—JUNE 2010

Society scholars must fulfill all CFA candidate requirements to register. If society scholars are undergraduate students, they must be in the final year of their degree program.

Candidate Cost:

- For the current exam offering, this scholarship will waive the Enrollment fee (if applicable) and all but US\$225.00 of the Registration fee.
- The chosen scholarship candidate will be responsible for the fee unless otherwise noted:

Complete the following (please print):

June 2010 Exam _____ Enrollment Level I II III (circle one)

Candidate No.: _____ Social Security No./National Identification No.: _____

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Fax: _____

E-mail: _____

Have you already registered for the CFA exam? [] Yes [] No

Are you a member of Italian CFA Society? [] Yes [] No

If yes, please write your ICFAS ID: _____

Are you employed? [] Part-time [] Full-time Name of employer: _____

Address of employer: _____

Occupation: _____

May we contact your supervisor? [] Yes [] No

If yes, name of supervisor: _____ Phone: _____

Are you a student? [] Part-time [] Full-time Level of school completed: _____

Name of undergraduate college or university: _____

Name of graduate college or university: _____

Highest degree held: _____

If no degree is held, when do you expect to receive your degree? _____

Current field of study: _____

Name of Professor: _____ Phone: _____

Please complete the questions on the reverse side of this form

Why do you want to achieve the CFA® Charter? _____

Briefly describe your involvement in activities and organizations: _____

Briefly describe your financial need for this scholarship: _____

I heard about this scholarship from: _____

- Optional:** Attach Resume
 Attach College Transcript
 Letter of Recommendation

(Date)

(Signature)

Please return this Application to: scholarships@icfas.it

