

#### BISMILLAH - HER - RAHMANIR RAHIM

#### AMERICAN MUSLIM ALLIANCE OF FLORIDA INC.

11694 Sunrise View Lane, Wellington, FL 33449. TEL: 561-966-6256 or 561-619-5388 mchowdhury@americanmuslimalliance.org

November 1st, 2021

To: The Principal

Re: Scholarship for Class of 2022 High School Seniors

Dear Sir or Madam,

American Muslim Alliance of Florida Inc. has been awarding scholarships to high school seniors of all races, religions, and creeds for the last fourteenth (14<sup>th</sup>) years.

Attached please find information regarding our scholarship program. We hope that you will make this scholarship package available to all of your students. This scholarship program is open for all high school seniors. If you have any questions, please feel free to contact me.

Sincerel

Mohammad Osman Chowdhury

President

American Muslim Alliance of Florida (AMAF)

Phone: 561-523-0922



### In the name of Allah, the beneficent, the merciful

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#### Dear Applicant:

The American Muslim Alliance of Florida Inc. will be awarding a total of \$20,000 in scholarships to thirty students in support of Florida High School Senior students in pursuit of a college education. The top 10 students will each receive a scholarship in the amount of \$1000. In addition, 20 students will each receive a scholarship in the amount of \$500.

Applicants must meet the following criteria to qualify:

- 1. The applicant must be graduating from a public, private, or home school within the state of Florida and entering college as a full-time student.
- 2. Applicants must have a cumulative GPA of at least 3.0 and attach official copies of school transcripts.
- 3. Applicants must provide two letters of recommendation from teachers of core subjects. Please limit letters of recommendation to one page for each recommendation.
- 4. Applicants guidance counselor must complete page 2.
- 5. Applicant must compose and type a <u>one-page</u>, <u>single-spaced essay</u> stating why you should be awarded a scholarship, and why you plan to further your studies at a college or university.
- 6. Applicants complete and submit page 4.

Scholarship Program is open for students of all faith and race. The winners will not be announced before the Scholarship Award Ceremony

APPLICATION DEADLINE: All completed applications must be received on or before May 6th, 2022 in the office of AMAF. Applications received or postmarked after this date will not be considered. Send the completed applications to: AMAF, INC., 11694 Sunrise View Lane, Wellington, FL 33449 ATTN: Scholarship Committee.

Thank you for applying with American Muslim Alliance of Florida INC Scholarship. For Further information, please call

President Mohammed Osman Chowdhury Tel: 561-523-0922	<u>Director</u> <b>Shakir Ahmed</b> Tel:561-351-6163	<u>Director</u> <b>Tahsin Nabid</b> Tel: 561-714-1596	<u>Director</u> <b>Imran Aziz</b> Tel: 561-767-6048
	Shamim Razin Tel:772-530-2674	Mohiuddin Chowdhury Tel: 941-894-4365	<b>Ruby Awlad</b> Tel: 954-628-2992

Note: AMAF, Inc. reserves the right to modify or cancel any aspect of this scholarship program and/or any related information contained in this scholarship program, in each case, without prior notice. AMAF, Inc. shall not be responsible, and specifically disclaims any responsibility, for the consequences of any such modification or cancelation and reserves the right to accept or reject (for any or no reason) any application. AMAF, Inc. has no obligation to grant a scholarship to any applicant, to renew any scholarship once it has been granted or to offer employment or an internship to any applicant.



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### STUDENT SCHOLARSHIP APPLICATION

Complete each item. Please print in black ink only.

THIS SEC	TION TO BE FILLE	D OUT BY STUDENT APP	LICANTS ONLY	
NAME				
LAST	FIRST	Γ	MIDDLE INITIAL	
HOME ADDRESS				
HOME ADDRESS	REET	CITY/STATE	ZIP	
511	XLL1	CITI/STATE	211	
E-MAIL ADDRESS				
TELEPHONE NUMBER _	HOME	WORK	CELL	
SS#, (optional)	(Last fou	r digit) DATE OF BIRTH		
HIGH SCHOOL PRESENT	LY ATTENDING			
Extra-Curricular Activities	Honors Awards Posit	tions of Leadership: (use addit	ional sheets if necessary)	
Extra-Currental Activities,	rionois, Awards, i osit	nons of Leadership. (use addit	ional sheets if hecessary)	
C-11/II	4441			
College/University you plan	to attend			
Intended Areas of Study				
STATEMENT OF APPLICA			*	
	have read and unders	tood the conditions of the AM	AF Office Student	
Scholarship Application.		Dete		
Applicant's Signature		Date		
Parent/Guardian's Signature		Date		
FATHER'S NAME		MARITAL STATUS		
OCCUPATION		EMPLOYER'S NAME		
MOTHER'S NAMEOCCUPATION		EMPLOYER'S NAME		
OCCUPATION		EMPLOTER S NAME		
NUMBER OF FAMILY MEMB	ERS			
INDICATE FIGURE NEAREST	TO AMOUNT OF FAMI	LY GROSS INCOME FOR 2020 o	2021; INCLUDE ALL SOURCES	
OF INCOME.	TO AMOUNT OF TAME	DI GROOD INCOME POR 2020 0	2021, 11102002112220011020	
\$30,000 TO \$ 40,000			TO 85,000	
\$40,001 TO \$50,000		\$85, 00	TO 110,000	
\$50,001 TO \$60,000			1 AND ABOVE	
MAILING ADDRESS: THE SCI	HOLARSHIP SELECTION	N COMMITTEE, AMAF Office: 11	694 SUNRISE VIEW LANE,	
WELLINGTON, FLORIDA, 334	49 (NOTE: LASTDAY O	F MAILING – May 6 <sup>th</sup> , 2022)		

Visite warm americanmuslimalliance are



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## **COUNSELOR(S) STATEMENT**

I,	, certify that
is a candidate for graduation of	, certify that, and has a current GPA of
SAT score of	and / or ACT score of
Additional Comments:	
*	
Counselor's Signature:	

Visit www.americanmuslimalliance.org

Time & Location for the Graduation Dinner & Scholarship Award Ceremony

7:00 PM, June 4<sup>th</sup>, (Saturday) - 2022

## **South County Civic Center**

16700 JOG Road,

Delray Beach,

Florida-33463

Telephone: (561)-495-9813

A)	South	County	Civic	Center

Attending this Dinner? (optional) Please Circle-Yes No

The number of guests who will be attending: 1 2 3 4 5

Signature\_\_\_\_\_

Please return this form with the application



Visit: www.americanmuslimalliance.org