



陳文成教授紀念基金會

Professor Chen Wen-Chen Memorial Foundation

P. O. Box 136

Kingston, NJ 08528

<http://cwcmf.net>

Memorial Scholarship Application Form

1. NAME _____ , _____ , _____
(Last) (First) (漢名, Hanji name optional)

2. NAMES OF PARENTS, Father _____ , _____
(漢名, Hanji name optional)

Mother _____ , _____
(漢名, Hanji name optional)

3. PERMANENT MAILING ADDRESS

_____ Number Street

_____ City State Zip Code

HOME PHONE: (_____) _____ SOC SECURITY NO: _____

4. PRESENT MAILING ADDRESS _____
Number Street

_____ City State Zip Code

5. DATE OF BIRTH _____ 6. PLACE OF BIRTH _____
Mo. Day Year

7. SEX _____ 8. MARITAL STATUS _____

9. EDUCATION (Institutions Attended, High School Level and Above. List most recent first.)

_____ School Dates-From-To Degree or Diploma
(Month & Year)



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Memorial Scholarship Application Form (Continued)

10. FELLOWSHIPS, HONORS, EXTRACURRICULAR ACTIVITIES, PERFORMANCE, ETC.
(Attach additional sheet if necessary, limit within two pages)

12. REFERENCES* (At Least Two; One from School and Another from Taiwanese Community.)

(1). _____

(2). _____

(3). _____

(4). _____

* Ask to Have Your Recommendation Letters Sent Directly to the Scholarship Evaluation Committee's Address as Listed Below.

13. CURRICULUM VITAE AND AUTOBIOGRAPHY (Use Separate Sheets)

14. ATTACH A COPY OF YOUR COLLEGE TRANSCRIPT.

15. Return Your Application and Recommendation Letters to:

Prof. Chen's Scholarship Committee
C/o Dr. Long R. Kao
3 Worcester Lane
Princeton Junction, NJ 08550

Signature of Applicant _____,

Date _____