

## American Spice Trade Association

## Susan L. Abbott Memorial Scholarship Application – 2015

Applicant Information					
(Please type or print legibly)	Overall grade point average				
Full Name:	First		<i>M.I.</i>	Date:	
Last	1 1131		101.1.		
Address:			Apartme	ent/Unit #	
City			State		ZIP Code
Phone: ()	E-mail /	Address:			
Name of ASTA Member Company:		-	Name of Relat	ve:	
Relationship to Relative:					
Reason for seeking financial aid:					
Will the receipt of this scholarship jeopardize the	receipt of other	scholarshi	ps? Yes	No	
Education					
High School:	Address:				
From: To: Did you		YES NO	7	Date:	
College/University planning to attend:					
College:	Address:				
Degree: Anticipated Date of Graduation from College:					
	Referen	ces			
Please list one reference (letter of recommend	ation should be	attached)			
Full Name:	Rel	ationship:			
Position:			Phone:	)	
Address:					
For a complete list of requirements, please see attached Scholarship Checklist. Applications are due by Friday, March 6, 2015.					
SEND COMPLETED FORM TO:	American Spice Trade Association 1101 17 <sup>th</sup> Street, NW, Suite 700 Washington, DC 20036				