

PERSONAL DATA

Citizenship:

U.S.

Casualty Actuaries of the Mid-Atlantic Region

CAMAR Scholarship

APPLICATION DEADLINE: April 15, 2020

Applicant's Name: LAST FIRST MIDDLE Permanent Address: STREET CITY STATE/PROVINCE ZIP/POSTAL CODE Permanent Phone Number: (____)___ E-mail Address: School Address: STREET CITY STATE/PROVINCE ZIP/POSTAL CODE

School Phone Number: (____) ____ Date when switch to permanent address: _____

Permanent Resident Visa

EDUCATIONAL RECORD:

(Show most recent school first)

School (City, State/ Province)	Attended		Major Course	Current or	Current or	Final	School's	Date of
	From	То	of Study	Final Grade Average	Final Grade (overall)	Grade Average (major only)	Maximum Grade*	Graduation

For example: A = 5.0; A = 4.0; E (Excellent): 100; Other (explain): List scholastic honors earned. Please use separate sheet if necessary

ACTUARIAL EXAMINATION RECORD:

Please indicate examinations written, scores and dates taken. Also indicate if you will be writing an examination before the start of the next academic year. Visit the "Exams" section of www.casact.org for a description of the exams and what they cover.

Exam	Score	Date Taken

EXTRACURRICULAR AND PERSONAL ACTIVITIES:

Please list school activities, organization memberships, community activities and hobbies. Include specific events or accomplishments. Please elaborate on a separate sheet if necessary

Activity	Years of Participation	Number of Hours/Week	Position Held or Honors Won

EMPLOYMENT AND INTERNSHIP RECEIVED:

(Show most recent employer first; attach a resume if you prefer. Please include confirmed Summer 2020 internships.)

Employer	Date Employed	Nature of Work	Hours Per Week

CERTIFICATION

All of the information on this form is true and complete to the best of my knowledge						
Applicant's Signature:	_					