American Society of the French Academic Palms  
Summer Scholarship Program 2017

Application must be POSTMARKED by January 15, 2017.

The American Society of the French Academic Palms (ASFAP) will offer 2 summer scholarships to be used in a French-speaking country to students whose interest in the French language and Francophone cultures has been identified by their French instructors. Their primary purpose is to provide students with the opportunity to become more proficient in the language and to understand and appreciate cultures found in the French-speaking world. These scholarships should by no means be viewed as a pretext for paid holidays in a French-speaking country. Ideally, every French major in college or advanced-level French student in high school should have the experience of living and studying in France or in another French-speaking country. Therefore, priority will be given to those

1. who have never studied in a French-speaking country;
2. who have not had extensive experience in traveling to or living in French-speaking countries;
3. whose French professors have vouched for their interest and commitment to the study of French and francophone cultures;
4. who have identified an appropriate program of study for at least four weeks in a French-speaking country.

Note: The number of applications per recommending teacher is limited to one.

Applicants who are unable to submit a letter of recommendation from an ASFAP member will be interviewed by telephone or by Skype by a scholarship committee member if they are selected as a finalist.

ELIGIBILITY

1. At the time of application, candidates must be pursuing a French major or minor and be in their sophomore or junior year in college, or must be juniors or seniors in high school and enrolled in an advanced French course (a minimum of 3rd year French). Preference may be given for the high school award to students enrolled in an Advanced Placement, an International Baccalaureate, or an honors program in French.
2. The scholarship must be used during the summer of 2017.
3. Applicants must be American citizens by birth or by naturalization.

INELIGIBILITY

1. Native speakers of French from any Francophone country (exceptions will be made only for those who came to the United States as children and whose linguistic competence in French cannot be qualified as native or near-native).

DESCRIPTION

The scholarship is best used to study in a French-language institution of higher learning. Applicants will select their institution as well as arrange for their travel to the French-speaking country. Minimum stay in the Francophone country is four weeks.

FUNDS PROVIDED

The American Society of the French Academic Palms will offer two scholarships of four thousand dollars ($4,000) each. College sophomores or juniors and high school juniors or seniors may apply. Awards will be announced by March 1, 2017. A check for $3,500 will be sent to the awardees upon submission of a copy of the letter of acceptance to a program in a French-speaking country. The balance of $500 will be sent upon completion and submission of the article described in section 3 below under “Requirements.”

REQUIREMENTS FOR THE 2 RECIPIENTS:

1. By April 1, 2017, send to Professor Will Thompson, ASFAP Editor < wjthmpsn@memphis.edu, with a copy to Joyce Beckwith < MmeJoyB@aol.com, for publication in the Society’s Gazette Violette a digital photo and a short description in French of the summer program selected.
2. By April 30, 2017, email Scholarship Chair, Joyce Beckwith < MmeJoyB@aol.com > a copy of the official acceptance to a four-week program in a French-speaking country.
3. By September 1, 2017, submit to Professor Will Thompson, ASFAP Editor < wjthmpsn@memphis.edu > for the Society’s Gazette Violette, an article in French on the summer experience (approximately 300 words) and a digital photo of the recipient in the Francophone country with a copy to Joyce Beckwith < MmeJoyB@aol.com >.

APPLICATION — Submit as 3 complete sets (separated and collated; i.e., fully assembled so that each set constitutes a complete dossier, held together by a paper clip—do not staple)

I copy per set of each of the following:

1. ____ (Check) APPLICATION form (original + 2 copies).
2. ____ (Check) ESSAY in French (original + 2 copies); The program in the Francophone country chosen must be identified.
3. ____ (Check) TRANSCRIPT (1 official copy, which must be signed AND stamped or embossed with the institution’s official seal to be valid + 2 copies);
4. ____ (Check) RECOMMENDATIONS (2 different recommenders)
   • ASFAP member: (original + 2 copies, each letter in a sealed envelope).
   • Current French instructor: (original + 2 copies, each letter in a sealed envelope).
If the student cannot obtain a recommendation from an ASFAP member or if the current French instructor and ASFAP member are the same person, request a recommendation from another instructor, preferably another French teacher.
American Society of the French Academic Palms
SUMMER SCHOLARSHIP APPLICATION

Deadline: Must be POSTMARKED by January 15, 2017.

High School Student (Junior)_____ (Senior)_____ Post-secondary Student (Sophomore)_____ (Junior)_____

Date and place of birth: ________________________________ U.S. Citizen (date): _______________________

Name: _____________________________________________
(Last) (First) (Middle)

Address: (Permanent)
(Number and Street) (City) (State) (Zip)

Telephone: ______ - ______ - __________

Email ____________________________________________

Address (Academic Year)
(Number and Street) (City) (State) (Zip)

Telephone: ______ - ______ - __________

Email ____________________________________________

School/College/University: ________________________________
Institution’s Address: ____________________________________________
(Number and Street) (City) (State) (Zip)

Have you ever traveled abroad? Yes _____ No _____
If yes: Where? When? Purpose? Length? (family/ school travel, home stay, study) (Use additional sheets if necessary.)
________________________________________________________________________
________________________________________________________________________

Academic Background: HS (advanced-level candidate ____); Post-secondary (French major ____ French minor ____)
HS: current/last completed course(s) in French; Post-secondary: number of credited hours completed in French and list French courses in progress

Graduation projected date _______________

Recommended by ASFAP member (Name) ________________________________

Recommended by French teacher (Name) ________________________________

Signature of Candidate __________________________________ Date ______________________________

Signature of Parent or Guardian if applicant is under 18 years of age: ______________________________

***On a separate sheet, type and sign an essay in French describing yourself, your current level of French study, why and for what purpose(s) you are studying French, and a detailed plan of how you will spend four weeks in a French-speaking country if you are chosen for the scholarship. Identify the program you have chosen. (350-500 words)

ALL APPLICATIONS MUST BE POSTMARKED BY JANUARY 15, 2017.
INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED.

Mail Your Application to:
Mme. Joyce Beckwith, Chair ASFAP Scholarship Program
159 Main St. # 37A
Stoneham, MA 02180

Questions? Email: MmeJoyB@aol.com; Telephone: 781-438-6829
American Society of the French Academic Palms
Summer Scholarship

_____ (Check) ASFAP Member’s Recommendation (original + 2 copies, each in sealed envelope)
_____ (Check) French Teacher’s Recommendation (original + 2 copies, each in sealed envelope)

Instructions to applicant: Make copies of this form for use by your two recommenders: a French teacher and an ASFAP member. Have your recommenders return the recommendation forms to you. Recommenders should complete the recommendation forms (original and two copies of each recommendation in a sealed envelope), and you should include the sealed envelope in your application packet to be POSTMARKED by January 15, 2017.

Mail Your Scholarship Application to: Mme. Joyce Beckwith, Scholarship Program Chair, ASFAP
159 Main St. # 37A
Stoneham, MA 02180  Email: MmeJoyB@aol.com

Nom du candidat: _________________________________________________________________________
Depuis quand et comment le/la connaissez-vous?________________________________________________
Depuis combien de temps fait-il/elle du français? _________________________________________________
Indiquer le niveau de compétence selon les critères d’ACTFL Proficiency Guidelines:
http://www.sil.org/lingualinks/LANGUAGELEARNING/OtherResources/ACTFLProficiencyGuidelines/TheACTFLGuidelines.htm
parlé __________  écrit __________  auditif __________  lecture __________

Veuillez décrire comment le candidat, à votre avis, tirera avantage de cette bourse et de son séjour dans un pays francophone. (Vous pouvez ajouter des pages.)

Nom et prénom (en caractères d’imprimerie) ______________________________________________________

Signature du Professeur/Membre : __________________________ Date : __________________________
Si vous êtes membre de l’ASFAP, veuillez indiquer si vous êtes:  ____Chevalier  ____Officier  ____Commandeur

Adresse : ________________________________________________________________________________________

Courriel : __________________________  Téléphone _____  __________________________