



HONPA HONGWANJI MISSION OF HAWAII
APPLICATION FOR KAHUKU HONGWANJI SCHOLARSHIP

Today's Date: _____

Name: _____
(Print) Last Name First Name M.I.

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Home): _____ (Cell) : _____

Email: _____

Date of Birth: _____ Place of Birth: _____

EDUCATIONAL INFORMATION (also include in each Education City and State):

High School: _____

Colleges or Universities, if any (include dates attended, degrees, date of degrees, majors):

1. _____

2. _____

3. _____

Applicant's Signature: _____ Date: _____

Temple Affiliation: _____

Please submit on a separate sheet, typed:

1. Why are you applying for this scholarship?
2. Name and place of college/university attending, field of study, full-time or part-time status, courses and credits
3. Letters of recommendation from two (2) persons who know you well
4. Essay on Dharma and My Life
5. Other pertinent information (e.g. academic honors, awards, fluency in foreign languages, work experiences, temple activities. etc.)

The above information and application should be submitted to by the deadline described:

HAWAII KYODAN SCHOLARSHIP COMMITTEE
Honpa Hongwanji Mission of Hawaii
1727 Pali Highway
Honolulu, HI 96813

If you have any questions regarding this application, please call the Office of Bishop, Hawaii Kyodan Headquarters of the Honpa Hongwanji Mission of Hawaii, (808) 522-9200 or Email hqs@honpahi.org.

Person to notify in case of emergency:

Name: _____

Relation: _____

Address: _____

Phone: _____

Email: _____

OFFICE USE ONLY

KAHUKU HONGWANJI SCHOLARSHIP FOR THE YEAR _____

Action of Bishop

Approved: _____ Denied: _____

Comments:

Signature: _____

Date: _____

Action of Committee

Approved: _____ Denied: _____

Comments:

Signature: _____

Date: _____