

THE GOLDEN GATE SOCIETY FOR COATINGS TECHNOLOGY

OFFICIAL APPLICATION FORM --- CONFIDENTIAL ALFRED APFEL MEMORIAL SCHOLARSHIP ROBERT E. MINUCCIANI SCHOLARSHIP

I. COLLEGE STUDENTS:

| Name: | |
|--|-------------|
| Address: | |
| City, State, Zip: | |
| Phone: | |
| Email: | |
| Date of Birth: | |
| Father's Name: | |
| Mother's Name: | Occupation: |
| College Attending Now or Going to Attend: | |
| What major or principal course of study will you pursue? _ | |
| II. COATINGS INDUSTRY PARTICIPANTS: | |
| Name: | |
| Workplace: | |
| Short Course Applying For: | |
| Dates of the Course: | |
| III. SIGNATURE OF APPLICANT | |
| (Signed) | (Date) |

Submit application to: