KEIKO FUKUDA JUDO SCHOLARSHIP

Application Form A Program of the USJF Endowment Trust

A.	PERSONAL INFORMATION		
	DATE:		
	NAME:		
	ADDRESS:		
	CITY:	STATE:	_ZIP:
	PHONE: ()	BIRTH DATE	:
	E-MAIL ADDRESS		
	INSTRUCTOR'S NAME:		
	YOUR RANK:	YEARS IN JUDO:	
	U.S. CITIZEN: YES NO		

B. PLEASE LIST ANY OUTSTANDING CONTRIBUTIONS YOU HAVE MADE TO HELP THE DEVELOPMENT OF JUDO (Locally/Nationally):

Page 2 of 2 for Applicant (NAME):			
C. PLEASE LIST ALL CHAMPIONSHIPS WON (LOCAL, NATIONAL) (RANDORI OR KATA)			
D. PERSONAL STATEMENT: PLEASE SUBMIT A STATEMENT, NOT EXCEEDING ONE PAGE, TYPED, AND DOUBLE-SPACED. THIS STATEMENT SHOULD REFLECT YOUR PERSONALITY, YOUR MAJOR FIELD OF INTEREST (IF NOT APPLYING FOR POST-SECONDARY EDUCATION EXPENSES, THIS FIELD OF INTEREST NEED NOT BE AN ACADEMIC FIELD), AND YOUR VIEW OF HOW JUDO HAS INFLUENCED OR HAS BEEN APPLIED TO YOUR DAILY LIFE. IF SEEKING FUNDING FOR POST-SECONDARY EDUCATION, HOW WILL JUDO INFLUENCE OR APPLY TO YOUR MAJOR FIELD OF INTEREST?			
E. AGREEMENT: I have read and fully understand the eligibility requirements and information requested for the Keiko Fukuda Judo Scholarship and have completed the application truthfully and completely. I fully understand that any misrepresentation of the information contained in this application may result in forfeiture and, if necessary, the required repayment of monies received.			
Signature of Applicant Yudanshakai			
Signature of Yudanshakai President			
All information and supporting documents MUST BE COMPLETE in order for your application to be considered.			
Please send completed applications to:			
Keiko Fukuda Judo Scholarship c/o Mrs. Eiko Shepherd 1918 North 57th Street			

Washington Park, IL 62204 Tel.: (618) 875-2558 Fax: (618) 875-1617