

Over \$287,000 IN SCHOLARSHIPS WILL BE AWARDED TO MEMBERS OF



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EARLY ELEMENTARY SCHOOL (Grades 1-2-3-4) 2026-2027 SCHOLARSHIP APPLICATION

RULES OF ELIGIBILITY

1. An eligible candidate for a First Catholic Slovak Ladies Association Fraternal Scholarship Award must meet the following qualifications:
 - a. A member in good standing with the Association for a minimum of **three years** prior to date of application. The applicant must also hold **one of the following policies in their own name**: a permanent life insurance policy with a face amount of at least \$1,000; a term insurance policy with a minimum coverage of \$5,000; or an annuity certificate. Membership eligibility and policy requirements will be verified by the Home Office records.
 - b. **Members currently enrolled in Z-Branches**, formerly known as Polish Women's Alliance of America (PWAA) - who meet all other eligibility criteria may apply for any available scholarships.
 - c. Select a **Private or Catholic accredited elementary school** in the United States.
 - d. **Applicants may receive one scholarship per category.** If you have already been awarded an Early Elementary Scholarship (grades 1-4), you are not eligible to apply for an additional Early Elementary Scholarship.
 - e. **Use of Funds:** The award must be applied toward **school-related expenses** for the academic year for which it was awarded. Eligible costs include tuition, books, fees, and course- or degree-specific expenses, such as required supplies or equipment.
 - a. **Photo Submission:** Include a wallet-sized photo (optional). It must be either:
 - a printed photo on photo paper; or
 - a .jpg attachment submitted electronically. Note: Photos must be of good quality to be eligible for publication.
 - b. **Submission Deadline:** All applications and supporting documents must be **POSTMARKED or electronically received by Tuesday, February 10, 2026**. Late submissions will not be considered. Materials submitted will not be returned.

Applications and supporting documents may be submitted as a PDF file via email or sent via fax to (216) 464-9260, Attn: Scholarship Dept. For email submissions, please use the following address scholarship@FCSLA.org.

2. **Winners are selected in a lottery-type drawing by an outside committee.** Winners will be notified by letter. Names of winners will be published in the August issue of "Fraternally Yours". The Award check will be issued in the name of the elementary school and the name of the winning student.
3. 32 – Early Elementary School Fraternal Scholarship Awards will be given as follows:

1st grade - \$750 each
2nd grade - \$750 each

3rd grade - \$750 each
4th grade - \$750 each

4. Send completed application and address all communications to:

FCSLA Life
ATTN: Scholarship Dept.
24950 Chagrin Blvd.
Beachwood, OH 44122
E-mail: Scholarship@fcsla.org
Fax: (216) 464-9260

To contact the Scholarship Department:
Phone: (216) 464-8015 Ext. 1054 or (800) 464-4642 Ext. 1054

TERMS OF AWARD

1. **The award must be used solely for school-related expenses – such as tuition, books, fees, and course- or degree-specific supplies and equipment - for the academic year in which it was awarded.**
2. If a scholarship recipient withdraws from their program, the award must be returned to First Catholic Slovak Ladies Association Fraternal Scholarship Fund.
3. Recipients are expected to comply with all regulations of their educational institution. This includes, but is not limited to, requirements related to residence and conduct, as deemed satisfactory by the vocational school, technical institute, or college.
4. The Board of Directors of First Catholic Slovak Ladies Association reserves the right to withdraw and cancel the scholarship if, in the judgment of both the Board and the educational institution, the recipient is no longer eligible to hold the award.



24950 Chagrin Blvd.
Beachwood, Ohio 44122

**2026 EARLY ELEMENTARY
SCHOOL
(Grades 1-2-3-4)
Fraternal Scholarship Application**

Home Office Use

For the purpose of establishing my eligibility for a scholarship award, I submit the following information which I represent to be true and complete. I have read in entirety the Rules of Eligibility and Terms of Award and I hereby accept and agree to the said Rules and Terms.

I will be attending school in the fall in (circle one): 1st Grade 2nd Grade 3rd Grade 4th Grade

APPLICANT'S PERSONAL INFORMATION (please print or type)

Full Name:			
Home Address:			
(street)	(city)	(state)	(zip)
Social Security # (last 4 digits):		Email:	
Date of Birth:		Telephone:	
Father's Name:		Mother's Maiden Name:	

Have you ever received an FCSLA Fraternal Scholarship Award? (circle one) Y N

If yes, enter: Year _____ Category _____ Amount _____

Select One: (Your choice does not affect eligibility)

____ I am attaching my photograph (a photo printed on photo paper or a .jpg attachment to an e-mail). If selected as a scholarship recipient, I would like it to be included in the FCSLA publication announcing this year's winners.

____ I elect not to include a photograph of myself. If selected as a scholarship recipient, no photo will be included in the FCSLA publication announcing this year's winners.

APPLICANT'S SCHOOL INFORMATION

	Name and Location of School	Dates of Attendance
Elementary		

Applications and supporting documents must be POSTMARKED or electronically received no later than Tuesday, February 10, 2026.

Application for scholarship and supporting documents should be mailed to:

**FCSLA Life
First Catholic Slovak Ladies Association
ATTN: Scholarship Dept.
24950 Chagrin Blvd.
Beachwood, Ohio 44122
E-mail: Scholarship@fcsla.org
Fax: (216) 464-9260**

I understand that this award must be used towards school-related expenses (e.g., tuition, books, fees, and course or degree-related costs (like supplies and equipment required for specific classes) for the academic year for which it was awarded. (please initial) _____

I certify that the information on this form and the supporting documents are true and complete to the best of my knowledge. I understand that the information will be considered confidential, for review by the Judging Committee. I consent to the filing of the application and accept the Rules of Eligibility and Terms of Award.

Date

Signature of parent or guardian

Mailing address of applicant

Mailing address of parent or guardian if different

TO BE COMPLETED AT HOME OFFICE

Certificate No.	Date Issued	Amount	Plan

Date of Membership _____

Verified by _____



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2026 EARLY ELEMENTARY SCHOOL (Grades 1-2-3-4) Fraternal Scholarship Application

Home Office Use

Student's FIRST NAME ONLY: _____

I am applying for a First Catholic Slovak Ladies Association Fraternal Scholarship Award for the academic period beginning year 20_____

I will be attending as a (circle one): 1st Grade 2nd Grade 3rd Grade 4th Grade

Name and address of school selected _____

TO BE COMPLETED BY THE JUDGING COMMITTEE:

Winners are selected in a lottery-type drawing

Order of # Pulled _____