



Date of Application: _____

The Scholars Program™ ENROLLMENT FORM

Program Tuition: \$300

Your enrollment will be assigned to the Chapter nearest your location for processing. You will receive a confirmation by mail with specific details and a schedule of upcoming **Scholars Program™** components once your enrollment has been processed.

SECTION A: Parent Section

Father: _____ DOB: _____ Natural Step-parent

Mother: _____ DOB: _____ Natural Step-parent

Address: _____

City: _____ State: _____ Zip: _____

Telephone: Father: (day) _____ (eve) _____

Mother: (day) _____ (eve) _____

E-mail Address: _____

Number of Dependents for the student's first college school year (*including the student*): _____

Number of College Students for that school year (*including the student*): _____

How did you hear about our programs? (Check all that apply)

Referred by _____

Referred by Guidance Counselor

AMEDF Website

Participation in other AMEDF programs

SECTION B: Student Section

Name : _____ DOB: _____ Gender: _____

High School: _____

Graduation Year: _____ Yr to Start College: _____

PSAT _____ SAT _____ SAT II _____ ACT _____ (*if scores are available at the time of application*)

Cumulative GPA (estimate): _____ Rank (estimate): Top 10% Top 25% Top 50%

MyRoad™ account information

I already have a Collegeboard.com account. Please create a MyRoad™ account for me using this College Board account information: This information will be used only to create a MyRoad™ .com account for the student.

username _____ password _____

I already have a MyRoad™ account, but want my account listed with AMEDF so that my Scholars Program™ Instructor can help guide me by being able to see *My Plan*. This information will be used only to create a MyRoad™ .com account for the student.

username _____ password _____

I do not have a CollegeBoard.com or MyRoad™ account. Please create one for me and send me the access information.

Email address: _____

Note from the College Board:

- We encourage you to maintain a single account to ensure that you can access all of your information and receive important emails about your SAT registration and other activities.
- You will not be able to register for the PSAT or SAT or get scores with this new account if you started any PSAT or SAT activity with your other account.

College Major(s) of Interest: _____

College Location: List specific states of interest _____

Colleges currently interested in _____

If you have an instructor you would prefer to work with, please list his or her name below. For information about our instructors, please visit our website at www.amedf.org. Please note that specific instructor requests may not be honored due to capacity and other constraints:

Name of Preferred Instructor: _____

The tuition and membership fee is \$300 for the **Scholars Program™**. \$100 of this \$300 may be tax-deductible as a charitable contribution. Please consult your tax advisor.

- I qualify for the for enrollment at the 85% subsidy level, tuition is \$150 *
- I qualify for the for enrollment at the 100% subsidy level, tuition is \$0 *

**An "Additional Tuition Subsidy Voucher" certified by an AMEDF instructor must accompany this enrollment form to qualify for the additional Scholars Program™ tuition subsidy rate.*

Please send your completed enrollment form with tuition to:

AMEDF TUITION-BASED PROGRAMS
P.O. Box 1685, Amherst, NY 14226

PAYMENT OPTIONS:

Check:

PLEASE MAKE CHECKS PAYABLE TO AMERICAN EDUCATION FOUNDATION

Any applicant not accepted for enrollment will have their check returned. Applicants completing the credit card authorization will have their credit card charged only if accepted for enrollment.

Credit Card Authorization: **Scholars Program™** tuition and membership fee (circle one) **\$300** **\$150**

- VISA MC AMEX DISCOVER

Card # _____

CV2 Code: _____ AMEX: 4 digits on card front

Expiration Date _____

Card Holder Name _____

Billing Address _____

City _____ State _____ Zip code _____

Billing Phone Number (_____) _____

Credit Card Authorization Signature _____



CVV2

The American Education Foundation is a member of the College Board and the National College Access Network. The AMEDF does not discriminate on the basis of race, gender, nationality, or economic status. All applications for program enrollment will be processed on a first-come, first-served basis. Please note that program availability varies by area, and may be closed without any advanced notice. Applications received after program capacity has been reached will be automatically considered for enrollment in the next term. AMEDF's financial information may be obtained upon request or from: **New Jersey-** Information filed with the Attorney General concerning this charitable solicitation may be obtained from the Attorney General of the State of NJ by calling 973-504-6215. Registration with the Attorney General does not imply endorsement. **New York -** the Department of NY State Attorney General's Charities Bureau, Attn: FOIL Officer, 120 Broadway, New York, NY 10271 **North Carolina-** Financial information about this organization and a copy of its license are available from the State Solicitation Licensing Branch at 1-888-830-4989. The license is not an endorsement by the State. AMEDF does not sell, trade, rent, lease or share your personal information to any third-party source except member organizations of American Education Foundation's College Access and Affordability Alliance.

MISSION: ensure college success by providing students and their families quality guidance that is personalized, reliable, objective and affordable in order to make informed decisions about college.

VISION: every student successfully enrolls at the college that best provides the knowledge to achieve their career aspirations and graduates in the shortest time possible at a cost the family can afford.