

<u>: </u>	ZIP	:	
EPHONE: Email	BIF	THDAT	E:
SCHOOL ATTENDING:			
: CLASS RANK:	DA	TE OF C	GRADUATION:
PLEASE LIST COLLEGES / UNIVERSITIES THAT YO AND PLEASE INDICATE IF YOU HAVE E			
Name of School		Accep	ted for Admission
1	YE:	S	PENDING
2.	YE	S	PENDING
3. COURSE OF STUDY THAT YOU PLAN TO F		S second	
-	OLLOW (List first and	second	
COURSE OF STUDY THAT YOU PLAN TO F	OLLOW (List first and	second	choices):
COURSE OF STUDY THAT YOU PLAN TO FO	OLLOW (List first and	second	choices):
COURSE OF STUDY THAT YOU PLAN TO FO	OLLOW (List first and 2. \$\frac{1}{2} \tag{\frac{1}{2}} \tag{\frac{1}} \tag{\frac{1}{2}} \tag{\frac{1}{2}} \tag{\frac{1}{2}} \frac{	second	choices):
COURSE OF STUDY THAT YOU PLAN TO FO	OLLOW (List first and 2. \$ ation:	second	choices):
COURSE OF STUDY THAT YOU PLAN TO FO	Solution: \$	second	choices):
COURSE OF STUDY THAT YOU PLAN TO FO	2. sation: strict and	second	choices):

All information listed in this application is strictly confidental and all forms must be completed in full to be eligible for consideration.



Please Type or Print Legibly	
Father's Name:	Living / Deceased
Present Employer:	Income:
Mother's Name:	Living / Deceased
Present Employer:	Income:
If Applicable : Divorced / Seperated	Combined Annual Income:
Guardian's Name:	
Present Employer:	Income:
List family members of Italian ancestry Parents	
Grandparents	
Number of Siblings:	
Briefly describe your Italian heritage:	

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Name:	Addres	s:		
Phone:				
High School:				
	(Name and Location)			
Student Ranks	In a Graduating Class of	Students		
In Character, Personality, S is classified in the group ch	• • • • • •	onduct and Leadership, the candida		
A Group	(Highest 10%)			
B Group	(70-90 Percentile)			
C Group	(30-70 Percentile)			
D Group	(10-30 Percentile)			
E Group	(Lowest 10%)			
List below any special reco	ognition received for academic exc	cellence:		
Further pertinent remarks:				
(Signature)	(Position)			

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ALL TRANSCRIPT AND FORM COMPLETION REQUESTS DUE 2 WEEKS BEFORE DEADLINE



This is to be completed by a high school guidance counselor. You have been asked to provide information in support of an application for a scholarship. This evalution is a vital component of the applicant's overall application. Please give immediate and serious attention to the following questions. When completed, please return to the applicant.

THE APPLICANT'S CHARACTER, CONDUCT AND CITIZENSHIP IS:

EXCE	LLENT	GOOD	FAIR	
THE APPLICANT'	S CHOICE O	F POST SEC	ONDARY SCHOOL IS:	
EXCE	LLENT	GOOD	FAIR	
THE APPLICANT'	S ABILITY T	O SET ATTA	INABLE GOALS ARE:	
EXCE	LLENT	GOOD	FAIR	
	I KNOW TH	E APPLICAN	NT:	
EXTREMELY WELL	VERY	WELL	MODERATELY WELL	
Did the applicant receive any special rec	ognition in an	y school activ	vity? If so, What?	
List any special recognition for academi	c excellence:			
Additional comments:				
		-		
Signature		,	Title	

ALL TRANSCRIPT AND FORM COMPLETION REQUESTS DUE 2 WEEKS BEFORE DEADLINE

Telephone

Date



This is to be completed by a teacher or high school administrator. You have been asked to provide information in support of an application for a scholarship. This evaluation is a vital component of the applicant's overall application. Please give immediate and serious attention to the following questions. When completed, please

THE APPLICANT'S CHARACTER, CONDUCT AND CITIZENSHIP IS:

EXCELLE	NT	GOOD	FAIR
THE APPLICANT'S CH	OICE OF	POST SECO	ONDARY SCHOOL IS:
EXCELLE	NT	GOOD	FAIR
THE APPLICANT'S AB	ILITY TO	SET ATTA	INABLE GOALS ARE:
EXCELLE	NT	GOOD	FAIR
I KI	NOW THE	APPLICAN	TT:
EXTREMELY WELL	VERY V	WELL	MODERATELY WELL

ist any special recognition for	r academic excellence:		
dditional comments:			
ignature		Title	

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Telephone

Date