

2017 New York Grand Lodge Foundation Scholarship Application Carolyn Reres, Foundation President ~ Michele Ment, Scholarship Chairperson

APPLICATION FORM (Please Print or Type)

Name: L	_ast				First					Middle
Home Ad	ddress:		City	/	State		_ Zip	_ Emai	I	
Phone #	()		Date of Birth: M	o Day	Ye	ear _		Sex:	☐ Male	□Female
College/0	Curriculum to wh	ich you are applying _								
										ntering
Name/Ad	ddress of High S	chool								ation Date
	FAMIL	Y MEMBERS OF OSI	A LODGES SH		TE THE LO	DGE	E IDENTIFI			
₋odge N	ame & Number _	Duca Degli Abr	uzzi #443	, located (mailir	ng address)	126	6 Odell A	ve, Ei	ndicott, I	New York 13760
•	• •	plarship application of								
Member					Relatio	nshi	p to Studen	t		
								Phor	ne Number	607-785-2567
JIKEC	TIONS TO AF	PPLICANT: <u>CHEC</u>	K ONE: LI	Jndergraduat	e L	JGra	aduate			
		ig for: ☐ Italian St /Engineering ☐F				catio	on Studie	s □ Bu	ısiness l	Jndergraduate
1.	semester. G	te awards are for	e for college g	school seniors raduates who	who will will begin	begi gra	in full time duate stu	e unde		te study in the Fall 2017 017 semester. If choser
2.	The following MUST be submitted directly to the District Scholarship Chairperson for the applicant's lodge or geographi district: (a) Official transcripts including first semester senior year grades and SAT/ACT scores. (b) Class rank and size of graduating class should be included if possible. (c) Two letters of recommendation from teachers or counselors. (d) a student essay (no more then 350 words) summarizing educational and career goals, school and community service and discussion of the significance of your Italian heritage.									
3.	Scholarships are awards for academic excellence and service. Students are required to have a minimum average of 85 or above.									
4.	Applicant mu	st be a resident of	New York Sta	te and of Italia	ın heritage	١.				
5.	A \$10.00 application fee, made payable to the NY Grand Lodge Foundation, Inc., must be included with application.									I with application.
6.	Application, fee and supporting material must be sent to the District Scholarship Chairperson NO LATER THAN MAR 31, 2017.									
→ Sign	ature of Appli	icant					[ate _		
Name _	Josephine F	- ederico						_ Dist	trict	VII
Addres	s 4966 Drift	twood Drive, Live	rpool, NY 13	3088						

SCHOLARSHIP COMMITTEE CHAIRPERSON Michele Ment

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