**The Italian American Heritage Club of Hunterdon County Announces**

$1,000 Scholarship Awards

Four scholarship awards in the amount of one thousand dollars ($1,000) each will be awarded on the basis of merit: academic excellence; vocational/technical skill; school and community activities; service.

The Italian American Heritage Club of Hunterdon County Scholarship Awards are available to:

 \*Graduating seniors of Italian American heritage and residents of Hunterdon County

 \*Also, non-resident children and/or grandchildren of members of the Italian American Heritage Club of Hunterdon County

Applications can be obtained from the Counseling Office or Dorothy Aquila at the address below

The deadline for submission of applications is **April 15, 2017**

\*Applications should be mailed to:

 Dorothy H. Aquila

 IAHCHC Scholarship Awards Committee

 PO Box 2466

 Flemington, NJ 08822

1/17

Italian American Heritage Club of Hunterdon County

**Annual Scholarship Award Application**

Please Print All Information

Name of School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Principal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle Initial

**Family Information**

Father’s or Male Guardian’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s or Female Guardian’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of children in family excluding you:\_\_\_\_\_\_\_ Number in College:\_\_\_\_\_\_\_

Parents’/Guardians’ home/mailing address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents’/Guardians’ Telephone Number: Home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1/17

IAHCHC Annual Scholarship Award Application, page 2

**Student Information**

Employer Dates of Estimate Hours Employment per Week

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a job this coming summer? \_\_\_\_\_Yes \_\_\_\_\_No

If yes, give name of employer and estimate summer hours:

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Estimated Summer Hours:\_\_\_\_\_\_\_

Have you received scholarship help from other sources? \_\_\_\_\_Yes \_\_\_\_\_No

Please list below the schools to which you have applied and indicate after the name of the school **A** if Accepted; **R** if Rejected; **WL** if Wait Listed; **NR** if you have Not Received a reply:

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

2/17

IAHCHC Annual Scholarship Award Application, page 3

Write a brief summary stating your major, the school you wish to attend and your future goals – include reasons why:

**Student Personal Information**

Student’s Gender: Male\_\_\_\_\_ Female\_\_\_\_\_

Student’s Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List High School Activities including years of participation, offices held, distinctions/awards received

List Activities **Outside of School**, Community Commitments, Awards, etc. during high school and number of years involved (ex. 4-H, Church, Scouts, etc.)

Share your family’s Italian origins and how your family maintains Italian culture and traditions.

(250 word essay – please attach)

Where you born in Italy? \_\_\_\_\_Yes \_\_\_\_\_No

Father/Guardian of Italian decent? \_\_\_\_\_Yes \_\_\_\_\_No

Mother/Guardian of Italian decent? \_\_\_\_\_Yes \_\_\_\_\_No

I hereby apply for the IAHCHC Annual Scholarship Award. The information given in the application I affirm to be true and complete. I have read the conditions of eligibility that I have received with this application.

Signature of Student Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parents/Guardians:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 1/17

Italian American Heritage Club of Hunterdon County

To Be Completed by School Official (please print)

Name of School\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Principal\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Counselor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cumulative Average\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College Board Scores:

Scholastic Aptitude Test (SAT) V\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

American College Testing (ACT) Eng\_\_\_\_\_\_ Math\_\_\_\_\_\_

Reading\_\_\_\_\_\_ Science\_\_\_\_\_\_ ACT plus Writing\_\_\_\_\_\_

The above information has been furnished by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title Date

Include Official Transcript and Mail Both to:

 Dorothy H. Aquila

 IAHCHC Scholarship Awards Committee

 PO Box 2466

 Flemington, NJ 08822

 1/17

The Italian American Heritage Club of Hunterdon County Awards Program

Check List

The following check list must be completed and signed by Student and Parents/Guardians:

\_\_\_\_\_ **Application 1/17** is **Complete** and **Signed** by **both** Student and Parents/Guardians

\_\_\_\_\_ **Essay** – “Share your family’s Italian origins and how your family maintains

Italian culture and traditions.” is **attached** to the application

\_\_\_\_\_**Official Stamped Transcript** is **attached** to application

Signature of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parents/Guardians\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Best Wishes to You**

Applications will be reviewed blindly by a minimum of five (5) and maximum of seven (7) members of the IAHCHC awards committee.

The deadline for submission of applications is **April 15, 2017**.

Completed Applications should be mailed to:

 Dorothy H. Aquila

 IAHCHC Scholarship Awards Committee

 PO Box 2466

 Flemington, NJ 08822 1/17