



FEDERAZIONE ABRUZZESE del MICHIGAN

SCHOLARSHIP APPLICATION 2017

CRITERIA:

To be eligible to apply and compete for a scholarship, applicants must meet all the following criteria:

- A) Applicants must be of Abruzzese ancestry.
- B) Applicants must be graduating high school seniors, or full-time undergraduate students attending an accredited college or university and working toward a two or four year degree.
- C) High school applicants must have a cumulative GPA of at least 3.0 on a 4.0 scale. College/university applicants must have a cumulative GPA of at least 2.75 on a 4.0 scale.
- D) Parent or legal guardian must be an active member in good standing of the Federazione Abruzzese del Michigan for at least 12 months immediately prior to the date of this application.
- E) The parent/legal guardian or the scholarship recipient must attend at least three (3) FADM function/event(s), such as Gala, Christmas party, etc. per calendar year (unless in the case of an emergency or absence excused by the FADM Board of Directors). This qualification must be completed by the Scholarship Application deadline as determined by the Board of Directors.
- F) The student recipient of a scholarship award must be present at the award dinner to accept the scholarship (unless in the case of an emergency or absence excused by the FADM Board of Directors).

APPLICATION REVIEW:

In reviewing the scholarship applications, the Federazione Abruzzese del Michigan Scholarship Committee considers the following factors:

- A) The applicant's scholastic record.
- B) The applicant's community service record.
- C) The applicant's participation in extracurricular activities.
- D) The applicant's work experience.
- E) The applicant's references and recommendations.
- F) The applicant's status as a high school senior.
- G) Other scholarships received by the applicant.
- H) The applicant's participation in FADM activities.
- I) Any extraordinary circumstances.

The *Federazione Abruzzese del Michigan Scholarship* is renewable on a competitive basis. Continuing students must reapply annually.

THE APPLICATION CAN BE DOWNLOADED FROM OUR WEBSITE WWW.FEDABRUZZO.ORG OR ASK A BOARD MEMBER.

RETURN COMPLETED APPLICATION NO LATER THAN MAY 31, 2017 TO:

**FADM
c/o Sandra Tornberg
53794 Whitby Way
Shelby Twp., MI 48316**

Name:	Phone:
Address:	
Date of Birth:	Social Security Number:
Parents' Names: (Father)	(Mother)
Has your parent or grandparent been an active member in good standing of the Federazione Abruzzese del Michigan for at least 12 months immediately prior to the date of this application?	
_____Yes _____No	
If "yes" to the above question, state that member's name and relationship to you:	
Name:	Relationship:

SCHOLASTIC INFORMATION

Are you currently: _____A graduating high school senior/_____A full-time undergraduate student		
Date of Graduation:	GPA:	Intended Degree/Major:
List all high schools, colleges and/or universities you have attended (begin with the institution you are currently attending):		
NAME OF INSTITUTION	CITY AND STATE	DATES ATTENDED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
If you are a graduating high school senior, list the colleges/universities you have applied to or will be attending:		
NAME OF INSTITUTION	CITY AND STATE	STATUS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

AWARDS AND HONORS

List any scholastic awards and/or honors you have received:		
DESCRIPTION OF AWARD/HONOR	NAME OF AWARD/HONOR	DATE RECEIVED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

COMMUNITY SERVICE

List any community organizations in which you have actively participated:		
DESCRIPTION OF INVOLVEMENT	NAME OF ORGANIZATION	DATE OF SERVICE
_____	_____	_____
_____	_____	_____

EXTRACURRICULAR ACTIVITIES

List any other extracurricular activities in which you have actively participated:	
NATURE OF ACTIVITY	DATES OF ACTIVITY
_____	_____

EMPLOYMENT

List any work experience you have had (begin with your most recent employer):

NAME OF EMPLOYER

DATE OF EMPLOYMENT

POSITION HELD

OTHER SCHOLARSHIPS

Have you been awarded any other scholarships? ____ Yes ____ No

If you answered “yes” to the above, state:

DATE OF AWARD

NAME OF SCHOLARSHIP

AMOUNT AWARDED

OTHER REQUIREMENTS:

Each completed application must be submitted with:

1. Two letters of recommendation.
2. A short (2 page) biographical statement about the applicant. Your biographical statement must also address the significance of your Italian heritage.
3. Official copies of high school or college/university transcripts.

CERTIFICATION:

The information I provided in this application is true to the best of my knowledge:

(Date)

(Applicant's Signature)

