



LIGURIANS in the WORLD ASSOCIATION
www.sfliguri.com

ITALIAN-AMERICAN SCHOLARSHIP APPLICATION

Graduating High School Seniors with One Parent or Grandparent of ITALIAN Descent are Eligible for a \$2000 Scholarship

COMPLETED APPLICATION, APPLICANT'S PHOTOGRAPH and ALL the ITEMS LISTED BELOW ARE DUE WEDNESDAY, March 25, 2020

(Fillable PDF form is available for download at www.sfliguri.com or upon request via email at lfranzella@bhhscalear.com)

The following items **MUST BE PROVIDED WITH APPLICATION** and will be used in evaluation of the Applicants:

- 1. Scholastic record:** transcript of Applicant's scholastic record.
- 2. Essay:** an essay containing a maximum of 500 words **on the following topic:** *When you say "My family is Italian," what does this mean to you and how do you envision this influencing your life?*
- 3. Summary of Applicant's community service, extracurricular activities, confirmation of good character, and demonstration of leadership:** letter certifying activity record and character from the Applicant's Principal, Teacher or Counselor.

Applicant's Name

Address

City

State

Zip Code

Phone

Email

High school attending:

City

State

Zip Code

College/University planning to attend:

City

State

Expected Major or Field of Study at College/University:

Describe extra curricular activities, including length of time (continue on separate page if necessary):

Describe your community service activities, including length of time (continue on separate page if necessary):

Are you presently employed? If yes, describe:

Describe any plans for pursuing Italian studies:

Parent(s)
Name(s)

Address

City

State

Zip Code

Ancestral city/
town in Italy:

Is anyone in your family a member of an Italian-American Organization? If yes, provide name of organization.

I understand that in order to receive a scholarship, I will have been accepted or qualify for enrollment and plan to attend a junior college, college or university, which is public or private and offers courses leading to an academic degree. I further agree that to receive the scholarship I will be in attendance at the Awards Dinner on Friday, April 17, 2020 at the Fior D'Italia Restaurant, 2237 Mason St., San Francisco.

My signature certifies that the information submitted is true to the best of my knowledge:

Applicant's
Signature

Date

Please email completed application AND required additional items to: lfranzella@bhhscaireal.com,
OR mail to: Liguri Scholarships, 3712 Divisadero Street, San Francisco, CA 94123.

Four (4) Scholarships for \$2000 each will be awarded on FRIDAY, APRIL 17, 2020
at Fior D'Italia Restaurant, 2237 Mason St., San Francisco.

Those Applicants selected for a Scholarship will be notified by phone or email prior to the Awards Dinner.

*****RECIPIENTS MUST BE PRESENT AT AWARDS DINNER TO RECEIVE AWARD*****