## SONS AND DAUGHTERS OF ITALY CONNECTICUT GRAND LODGE FOUNDATION

## **APPLICATION FOR ACADEMIC 2024 SCHOLARSHIP**

PLEASE COPY AS NEEDED (THE CONTENTS OF THIS APPLICATION ARE CONFIDENTIAL)

## To the Foundation Scholarship Chairperson:

I hereby apply for a scholarship to be given at our Grand Lodge Convention Luncheon on June 8, 2024. In support of this application, I submit the following information and certify it to be true and correct. I understand that if any information submitted is determined to be untrue or incorrect, the committee may reject the application.

## Final Acceptance Date: April 15, 2024 (Postmarked)

**General Eligibility:** CT resident of Italian descent (at least one Italian or Italian-American grand-parent). No application will be considered unless all questions are answered. (Typing within the document is recommended, but not required), add additional pages if needed.

Note: Applicants must submit an official transcript from their high school.

| Name                                      | Date of Birth:                        |                          |   |
|---|---------------------------------------|--------------------------|---|
| Home Phone ( )                            | Email Address                         |                          |   |
| Address                                   |                                       |                          |   |
| City                                      | State                                 | Zip Code                 |   |
| High School                               | Address                               |                          |   |
| City                                      | State                                 | Zip Code                 |   |
| High School Phone ( )                     | GPA                                   |                          | _ |
| High School Counselor/Principal           | Email, If Available                   |                          |   |
| Name and Address of Father or Guardian    |                                       |                          |   |
| Name and Address of Mother (if different  | from above)                           |                          |   |
| Maiden Name of Mother                     |                                       |                          |   |
| Are you a member of the Sons and Daugh    | iters of Italy in America? If so,     | what lodge?              |   |
| Do you or did you have a family member    | that belongs to the Sons and Daughter | s of Italy?              |   |
| If so, provide member's name, relationshi | ip and address                        |                          |   |
| Lodge Name and Location                   | Are the                               | av currently a member? - |   |

| What college, university or trade school do you plan to attend?   |   |  |  |
|---|---|--|--|
| What major or principal study will you pursue?  |   |  |  |
|   | n to finance your college education. Include what portion parents nsible for. Please include any special circumstances or pertinent |  |  |
| Will you need to work? For what portion of the e  | expenses?   |  |  |
| <ol> <li>addition, please submit the following:</li> <li>Official Transcript</li> <li>Two (2) Letters of Recommendation. These recommendation community involvement.</li> <li>Name and addresses of two persons whom you h</li> </ol> | nmendation letters should exemplify your character, activities and ave asked to recommend you for a scholarship:                    |  |  |
| Name/Address:   |   |  |  |
| Name/Address:   |   |  |  |
| 4. An essay of at least 200 words to include the follo  | owing:  |  |  |
| member; and   | s, extra-curricular activities, and organizations which you are a are a are are are are are are are                                 |  |  |
| <b>REMINDER:</b> Verify all questions are answered correctly an isted below. Please certify by signing below.   | nd honestly. Send all above items in one envelope to the address  |  |  |
| Applicant   | Date  |  |  |
| Parent or Guardian  | Date  |  |  |
|   |   |  |  |

Please comply with all the above so that your application can be processed. An incomplete application will be rejected by the committee.

Mail application and all supporting documents to:

Neil A. Velleca Jr, President Sons & Daughters of Italy CT Grand Lodge Foundation P.O. Box 94 North Haven Ct, 06473

**DUE DATE: APRIL 15, 2024 (Postmarked)**