

ANNUAL SCHOLARSHIP PROGRAM SCHOLARSHIP APPLICATION

Please submit this application to the address listed above
No later than March 31, to be considered for this award
No action will be taken on applications postmarked after this date

To the Scholarship Applicant:

Thank you for your interest in the Hickory-Palos Sertoma Scholarship Program. Information contained in this application is to be used only by the Scholarship Committee and, as such, is considered confidential.

If you require extra space to answer any question, please use an additional page and attach it to this application and be sure to number your responses accordingly. Also, include a copy of your latest transcript showing your grade point average and class ranking with your application. If the application is handwritten, please ensure that it is legible.

All questions must be answered in full

1. Name	Sex	Birth c	late
2. Home Address		City	ZIP
3. Telephone () Present So	chool		
4. Father's Name			
5. Mother's Name	De	eceased?	When?
6. Father's Occupation Moth	ner's Oc	cupation _	
7. Number of children in family living at home:			
Brothers Ages			
SistersAges			
8. Parent's Combined Annual Income? (Mark o		* ·	•

_	ommittee in its selection	on, give us a reason why a scholarship is no	eeded
Tor you to be at	ore to atterna the serior	or or your choice.	
10. List high scho	ol or college extra cur	ricular activities for the curre nt year.	
Dates of Service	Activity	Responsibilities / Office Held	Hours Involved Yearly
	r work associated witl the current year.	h community/charity-oriented organizations	or
Dates of Service	Activity	Responsibilities / Office Held	Hours Involve Yearly
11. What academ	ic awards or honors h	nave you received in the current year?	
12. What college	or vocational school	are you attending or plan to attend in the fut	ture?
Major?		Minor?	

13. If you are p	olanning on attend	ding, have you applied yet? (Y/N		
13a. If so, have	you been accept	ed? (Y/N)		
14. At this school	How	much is tuition per year? much is room and board? additional fees (books, etc.)	\$ \$ \$	•
15. How much	of a contribution	do you expect from your parents	?	_
	•	n your immediate family that will g this school year.	_	-
16. List any full	or part time emplo	byment you have held in the pas	t year.	
Dates of Service	Activity	Responsibilities / Office Held		Hours Involved Yearly
18. Do you plan W	to work over the here?	nce in college (i.e. tutoring)? (Y/N summer? (Y/N)		
Type (S, G, L)	Provider/Organ	ization	Amount Awarde	ed
			- Comprise	Automotivity
~~*************************************		The accomplished the second of		(W)
20. List any sch	olarships, grants	or loans which you have been a	warded.	
Type (S, G, L) Provider/Organization		Amount Awarded		

21. What is your gra	ade point average for the past 7 semesters? (4.0 scale)	
22. What is your cla	ass rank?/	
23. In 150 -200 wor	ds, answer the following question on a separate piece of paper.	
"What goals d	o you have for your future and why do you feel continuing your	
education will	help you to achieve these goals?" Please include the course in	
college or vocational school you expect to pursue.		
Signature of:	Applicant:	
	Date:	
(If minor)	Parent/ Legal Guardian:	
	Date:	
24. Attach grade tra	anscript to this completed form and return to:	
	Hickory-Palos Sertoma Club	
	P.O. Box 2273 Bridgeview, Illinois 60455	
	Bridge view, minore ed vee	
4 001 10 4 71	ON MUST BE BETURNED BOOTMARKED BY MARQUING	
APPLICATION MUST BE RETURNED POSTMARKED BY MARCH 31.		
Scholarship winners will be notified in Mid-April.		
Questions? Contact	t: Mr. Gary Friederich (708) 218-1942	

Mr. Bob Jankovich (708) 975-8601