

Kiwanis Club of Howard Beach 2020 Scholarship Fund

College Scholarship Application

Applicant's Name:			Birth Date:	Birth Date:		
Но	me Address:	Telephone:	Telephone: Date of Graduation:			
Hig	gh School:	 Date of Gradu				
E-r	nail Address:					
Wł	nat College or University do you want to at	tend?				
			Major?			
A.	SCHOLASTIC ACHIEVEMENT: 1. The nominee's rank in class is o 2. The nominee's combines SAT scores of the nominee's composite ACT score * Please include a copy of your high scho	are is	es.			
B.	MERIT: SCHOOL EXTRACURRICULAR ACTI Activity	Year Participated	Office Held	Faculty Advisor		
C.	Activity	on-School related active Year Participated	Organization	Director/Advisor		
D.	HONORS/AWARDS: (Include membershi		any awards received, etc.)			
E.	WORK EXPERIENCE: (Full or Part time, su	ımmers, paid tutoring	. etc.)			
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F.	HOBBIES, SPECIAL ABILITIES & TALENTS:							
G.	FINANCIAL NEED: If there is a specific need for financial assistance, please describe. All applications will be kept in stricte confidence.							
Н.		•	write a short essay (300 words) describing why you want to attend college, and your plans to	oward a				
l.	RECOMMENDATIONS: Please submit three (3) letters of recommendation, on behalf of yourself. (Teacher, Counselor, Employer, Clergy, Community Leader, etc.)							
	I certify that the information contained in this Application is true and correct.							
		Date:	Signed:					
	Please attach the following information to your application:							
		1 2 3 4	High School Transcript SAT/ACT Student Score Report Essay Letters of Recommendation					
		Send the co	to: Kiwanis Club of Howard Beach Scholarship Fund c/o Dino Bono 164-15 84 St. Howard Beach NY 11414					
			Any questions, contact: Dino Bono at 646-401-2805, Go to Website www.howardbeachkiwanis.org, or email Dino at hbkiwanisdino@outlook.com					
	ſ	Committee use only						
		Received on:	Reviewed by:					