



## *Sons of Italy Western Foundation*

501(c)(3) Nonprofit Corporation Established -1959

Affiliation: GRAND LODGE OF CALIFORNIA

ORDER SONS & DAUGHTERS OF ITALY IN AMERICA

5051 Mission Street, San Francisco, CA 94112-3473

Phones: (415) 586-1316 fax: (415) 586-4786

Email: [sonsofitalyca@aol.com](mailto:sonsofitalyca@aol.com)

Website: [www.sonsofitaly.org](http://www.sonsofitaly.org)

## ***NOTICE OF AVAILABLE SCHOLARSHIPS***

The Grand Lodge of California, Order Sons and Daughters of Italy in America, announces the availability of scholarships for graduating seniors in the Class of 2021.

Scholarships are available in the following categories:

- Academic Awards for high school seniors
- Italian Language Study Grants in Italy for high school seniors for the summer of 2021
- Athletic Award for high school seniors pursuing a career in sports or a sports related field

The requirements applying for a Scholarship or Student Grant with the Order Sons and Daughters of Italy, Grand Lodge of California is as follows:

- Applicant **MUST BE** wholly or partially of Italian descent
- Applicant **MUST BE** enrolled in an accredited Trade School, College, University or Community College in the fall of 2021.

Applications are available through a School Counselor or **ON LINE** in a "pdf fillable format" by accessing the Grand Lodge of California, Sons of Italy website at [www.osiaca.org](http://www.osiaca.org) click on link for SCHOLARSHIPS.

If additional information is needed, please contact Scholarship Committee Chairperson Rosemarie Biagetti Vanderhaar; email: [rgeorev@aol.com](mailto:rgeorev@aol.com) or cell/text: 626/222-7768

***DEADLINE FOR ALL APPLICATIONS IS MARCH 1, 2021(Postmark)***



**ORDER SONS & DAUGHTERS OF ITALY IN AMERICA  
GRAND LODGE OF CALIFORNIA  
AND  
SONS OF ITALY WESTERN FOUNDATION**

**APPLICATION FOR ACADEMIC 2021 SCHOLARSHIP**

(PLEASE COPY AS NEEDED)

(THE CONTENTS OF THIS APPLICATION ARE CONFIDENTIAL)

**To the Grand Lodge of California Scholarship Chairperson:**

I hereby apply for a scholarship to be given in the month of **June 2021**. 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.

**All applicants must reside in the jurisdiction of the Grand Lodge of California.**

I also understand and agree that if I am awarded a scholarship by the Grand Lodge, it will be payable only upon proof of completion of the First Quarter/Semester of a recognized community college or accredited college or university, public or private, offering academic courses leading to an academic degree.

**Final Acceptance Date: March 1, 2021 (Postmark)**

Date \_\_\_\_\_ Signed \_\_\_\_\_

**Answer ALL QUESTIONS:** No application will be considered unless all questions are answered. (Typing is recommended). **Note: Applicants must submit an official transcript from their high school:**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Home Phone (    ) \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

High School \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

High School Phone (    ) \_\_\_\_\_ GPA \_\_\_\_\_

**High School Contact**

**Counselor or Principal**

**Email address, if available**

Name and address of Father or Guardian \_\_\_\_\_

Name and address of Mother \_\_\_\_\_

Maiden Name of Mother \_\_\_\_\_

Are you a member of the Sons of Italy? \_\_\_\_\_ If so, what lodge? \_\_\_\_\_

Do you or did you have a family member that belongs to the Sons of Italy? Is a family member currently a member?

If so, member's name, relationship and address \_\_\_\_\_

\_\_\_\_\_ Lodge name/location \_\_\_\_\_

What college or university do you plan to attend?

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What major or principal study will you pursue?

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Annual family income before taxes? (Federal Tax returns not required) \_\_\_\_\_

On a separate sheet of paper, please explain how you plan to finance your college education. Include what portion parents will be responsible for and what portion you will be responsible for. Please include any special circumstances or pertinent remarks.

Will you need to work? \_\_\_\_\_ For what portion of expenses? \_\_\_\_\_

In addition, please submit the following:

1. Official Transcript.
  2. Two (2) Letters of Recommendation. These recommendation letters should exemplify your character, activities and community involvement.
  3. Names and addresses of two persons whom you have asked to recommend you for a scholarship.
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4. An essay of at least **200 words** to include the following:
    - your Italian origin;
    - your future aspirations, work experiences, extra-curricular activities, and organizations which you are a member; and
    - include a paragraph at the end of the essay describing an Italian you admire (not related to you) who made an impression in your life.
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**REMINDER:** Verify that all questions are answered correctly and honestly. Send all above items in one envelope to the address listed below. Please certify by signing below.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Parent or Guardian

**Please comply with all of the above so that your application can be processed.**

**Mail application and all supporting statements/documents to:**

Sons of Italy Western Foundation  
Rosemarie Biagetti Vanderhaar  
Scholarship Committee Chairperson  
5051 Mission Street  
San Francisco, CA 94112

**DUE DATE: MARCH 1, 2021 (POSTMARKED)**

**ORDER SONS & DAUGHTERS OF ITALY IN AMERICA  
GRAND LODGE OF CALIFORNIA  
AND  
SONS OF ITALY WESTERN FOUNDATION  
APPLICATION FOR ATHLETIC 2021 SCHOLARSHIP  
FOR STUDENTS PURSUING A DEGREE IN SPORTS  
OR A SPORTS RELATED FIELD**

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

**To the Grand Lodge of California Scholarship Chairperson:**

I hereby apply for a scholarship to be given in the month of **June, 2021**. 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.

**All applicants must reside in the jurisdiction of the Grand Lodge of California.**

I also understand and agree that if I am awarded a scholarship by the Grand Lodge, it will be payable only upon proof of completion of the First Quarter/Semester of a recognized community college or accredited college or university, public or private, offering academic courses leading to an academic degree.

**Final Acceptance Date: March 1, 2021 (Postmark)**

Date \_\_\_\_\_ Signed \_\_\_\_\_

**Answer ALL QUESTIONS:** No application will be considered unless all questions are answered. (Typing is recommended). **Note: Applicants must submit an official transcript from their high school:**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Home Phone (    ) \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

High School \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

High School Phone (    ) \_\_\_\_\_ GPA \_\_\_\_\_

**High School Contact**

**Counselor or Principal**

**Email address, if available**

Name and address of Father or Guardian \_\_\_\_\_

Name and address of Mother \_\_\_\_\_

Maiden Name of Mother \_\_\_\_\_

Are you a member of the Sons of Italy? \_\_\_\_\_ If so, what lodge? \_\_\_\_\_

Do you or did you have a family member that belongs to the Sons of Italy? Is a family member currently a member?

If so, member's name, relationship and address \_\_\_\_\_

\_\_\_\_\_ Lodge name/location \_\_\_\_\_

What college or university do you plan to attend?

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What major or principal study will you pursue?

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Annual family income before taxes? (Federal Tax returns not required)

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On a separate sheet of paper, please explain how you plan to finance your college education. Include what portion parents will be responsible for and what portion you will be responsible for. Please include any special circumstances or pertinent remarks.

Will you need to work? \_\_\_\_\_ For what portion of expenses? \_\_\_\_\_

In addition, please submit the following:

1. Official Transcript.
  2. Two (2) Letters of Recommendation. These recommendation letters should exemplify your character, activities and community involvement.
  3. Names and addresses of two persons whom you have asked to recommend you for a scholarship.
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4. An essay of at least 200 words to include the following:
  - your Italian origin;
  - your future aspirations, work experiences, extra-curricular activities, and organizations which you are a member; and
  - include a paragraph at the end of the essay describing an Italian you admire (not related to you) who made an impression in your life.

**REMINDER:** Verify that all questions are answered correctly and honestly. Send all above items in one envelope to the address listed below. Please certify by signing below.

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Applicant

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Parent or Guardian

**Please comply with all of the above so that your application can be processed.**

**Mail application and all supporting statements/documents to:**

Sons of Italy Western Foundation  
**Rosemarie Biagetti Vanderhaar**  
**Scholarship Committee Chairperson**  
5051 Mission Street  
San Francisco, CA 94112

**DUE DATE: MARCH 1, 2021 (POSTMARKED)**

**ORDER SONS & DAUGHTERS OF ITALY IN AMERICA  
GRAND LODGE OF CALIFORNIA  
AND  
SONS OF ITALY WESTERN FOUNDATION**

**ITALIAN LANGUAGE STUDY GRANT APPLICATION FOR YEAR 2021**

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

**To the Grand Lodge of California Scholarship Chairperson:**

I hereby apply for an **Italian Language Study Grant** to be given in the month of **June 2021**. 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.

**All applicants must reside in the jurisdiction of the Grand Lodge of California.**

I also understand and agree that if I am awarded a scholarship by the Grand Lodge, it will be payable only upon proof of completion of the First Quarter/Semester of a recognized community college or accredited college or university, public or private, offering academic courses leading to an academic degree.

**Final Acceptance Date: March 1, 2021 (Postmark)**

Date \_\_\_\_\_ Signed \_\_\_\_\_

**Answer ALL QUESTIONS:** No application will be considered unless all questions are answered. (Typing is recommended). **Note: Applicants must submit an official transcript from their high school, including proof of study of the Italian Language or other foreign language while attending school:**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Home Phone (    ) \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

High School \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

High School Phone (    ) \_\_\_\_\_ GPA \_\_\_\_\_

**High School Contact**

**Counselor or Principal**

**Email address, if available**

Name and address of Father or Guardian \_\_\_\_\_

Name and address of Mother \_\_\_\_\_

Maiden Name of Mother \_\_\_\_\_

Are you a member of the Sons of Italy? \_\_\_\_\_ If so, what lodge? \_\_\_\_\_

Do you or did you have a family member that belongs to the Sons of Italy? Is a family member currently a member?

If so, member's name, relationship and address \_\_\_\_\_

\_\_\_\_\_ Lodge name/location \_\_\_\_\_



If awarded this Study Grant, do you have parental consent to study in Italy for a summer session of 30 days, during the month of July? If so, provide name and signature of parent/signature.

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**PARENTAL SIGNATURE**

If awarded this Study Grant, you will be expected to study the Italian Language under the direction of educators in Italy. You will also be expected to adhere to all rules and regulations set forth by these educators and the Grand Lodge of California, Order Sons and Daughters of Italy. Do you accept these terms and conditions?

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**APPLICANT SIGNATURE**

In addition, please submit the following:

1. Official Transcript.
2. Two (2) Letters of Recommendation, one from a Foreign Language teacher for this Study Grant. These recommendation letters should exemplify your character, activities and community involvement.
3. Names and addresses of two persons whom you have asked to recommend you for this Study Grant.

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4. An essay of at least **200 words** to include the following:
    - your Italian origin;
    - your future aspirations, work experiences, extra-curricular activities, and organizations which you are a member; and
    - include a paragraph at the end of the essay stating what you hope to gain from this Study Grant.

**REMINDER:** Verify that all questions are answered correctly and honestly. Send all above items in one envelope to the address listed below. Please certify by signing below.

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Applicant

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Parent or Guardian

**Please comply with all of the above so that your application can be processed.**

**Mail application and all supporting statements/documents to:**

Sons of Italy Western Foundation  
Rosemarie Biagetti Vanderhaar  
Scholarship Committee Chairperson  
5051 Mission Street  
San Francisco, CA 94112

**DUE DATE: MARCH 1, 2021 (POSTMARKED)**