Dear Guidance Counselor,

Enclosed you will find an application for the Utica Men's and Women's Scholarship.

The Scholarship is for \$500.00, and is available to any graduating Senior Male and Female, who maintains a C Average, is a Sanctioned High School Bowler who is bowling in the High School program at, Proctor High School, Notre Dame High School, New York Mills High School, New Hartford High School and Whitesboro High School and has been accepted as a candidate to any accredited College, University or Vocational School in the United States or Canada.

It is essential that the applicant's transcripts are included in this application.

The Deadline for applying is May 1, 2024

The applications will be collected by Mr. Bernard Tomaino and forwarded to the selection committee.

Please return this application to:

## Mr. Bernard Tomaino 1205 Greenview Dr. Utica, NY 13501

Any Questions can be directed to:

Utica WBC Chairwoman Utica UBA Chairwoman Utica WBC Secretary Mrs. Theresa Hartz Mrs. Janice Zamorski Mrs. Linda Hunter 315.735-3076 315.733-4202 315.376-7576

## IN MEMORY OF JIM GALLICCHIO

#### SCHOLARSHIP QUESTIONNAIRE

DEADLINE FOR APPLYING: May 1, 2024

- 1. Please have all information printed or typed.
- 2. Have all questions completed in all sections.
- 3. Have your Coach complete his/her section.
- 4. Have your High School Counselor complete his/her section and return this application with a copy of your High School transcript / Your High School Transcript are essential

# Mail to: Mr. Bernard Tomaino 1205 Greenview Dr. Utica, NY 13501

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Living or deceased				
Counselor Information				
TP 1 0 1 . 1 N				
High School Point Average: Rank in Class:				
High School Major:				
What Institute of higher learning does the applicant plan on attending? University: College: Vocational School:				
What extra school participation is the applicant involved in (band, orchestra, class officer, school club, etc.)				
What extra community service is the applicant involved in (volunteer work-hospital or nursing home facility) or general volunteer work, church activity, community drives, etc. State type of volunteer activity:				
Councilors Comments: (leadership scholastic record attitude character etc.)				
Counselors Comments: (leadership, scholastic record, attitude, character, etc.)				
Coaches Information				
Years involved in School Program:				
Bowling Achievements:				
High Game:				
High Series:				
Team Office held: Years Held:				
Local Tournaments:				
Additional Tournaments:				
Volunteer Work: (helping younger bowlers in league or tournaments)				
Coaches Comments: (sportsmanship, conduct both on and off the lanes, leadership)				

#### Please add an attachment if more space is required

### **Financial Sheet**

In order for our scholarship committee to review your request, it is necessary that you complete this form and return it along with the application by <u>May 1</u> All information will be held in strict confidence. If you wish to make additional comments, please use the reverse side of this form. It is understood that any false statement will negate this request.

Name of applicant:_				
Address:				
City:		ZIP:		
Occupation:				
Occupation: Mother/Guardian Employer:		Father/Guardian	Father/Guardian	
Employer:				
b. Total size of hou c. How many will b	s IRS adjusted gross or \$sehold:			
NAME:	AGE:	NAME:	AGE:	
Name of anyone liste		ed, list name and employer: EMPLOYER		
Signature of Mother/	Guardian:		Date;	
Signature of Father/C			Date:	