## Pittsfield Chapter of UNICO National Scholarship

## PITTSFIELD CHAPTER OF UNICO NATIONAL SCHOLARSHIP APPLICATION FORM

Section 1 - Personal Information

Name & Address:	Home Phone:
	Cell Phone:
HOME Email:	Age & Date of Birth:
Father's Name & Address:	Father's Occupation/Employer:
Mother's Name & Address:	Mother's Occupation/Employer:
Name of Relative of Italian Origin: i.e., Parent or Grandparent: ( <i>This Question Required for PCUNS</i> )	Guidance Counselor Verification:
School Presently Attending:	Academic Class Rank In a Class of

Please sign in ink

Signature of Applicant

Signature of Parent/Guardian

## **ELIGIBILITY:**

- 1) **ITALIAN ORIGIN** The candidate must have one parent or grandparent of Italian origin, documented and notarized proof may be requested by the selection committee if necessary.
- 2) **RESIDENCE** Candidate must reside in the corporate limits of UNICO of Pittsfield of Berkshire County.
- 3) EDUCATIONAL REQUIREMENTS A senior at any public or private secondary school located within the corporate limits or adjoining suburbs of the city wherein an active chapter of UNICO National is located. Candidate must submit scores for either S.A.T. or A.C.T. Test and must be recommendable to a college by his secondary school.
- FINANCIAL NEED Financial need will be considered and estimated on the basis of parent(s) annual income, their assets and special family circumstances.
- Extra Curricular and Community Participation The extent to which a candidate has contributed to the life and welfare of school and/or community will be taken into account in the assessment of merit.

ALL APPLICATIONS <u>MUST</u> BE ACCOMPANIED BY A TRANSCRIPT AND A COPY OF THE FIRST PAGE OF YOUR STUDENT AID REPORT (EFC). NO EXCEPTONS WILL BE MADE. FAILURE TO COMPLY WITH ABOVE CRITERIA WILL RESULT IN IMMEDIATE DISQUALIFICATION.

 Pittsfield Chapter of UNICO National Scholarship Due May 20, 2020 MAIL TO: Chairman Scholarship Committee Pittsfield Chapter of UNICO P.O. Box 2672 Pittsfield, MA 01202-2672

THE LARGEST <u>ITALIAN AMERICAN SERVICE ORGANIZATION IN THE US</u> " SERVICE ABOVE SELF"

Age Only (No Names)	Grade- If College – Year & Name Of College	Dependent on Parents?
		🛛 Yes; 🗖 No
		🛛 Yes; 🗖 No
		🗆 Yes; 🗖 No

Section 3 – Scholastic Information

College/University You Plan to Attend:		Have you received your official acceptance:		
College Board Scores:				
5	S.A.T. Scores:	G.P.A.:	or A.C.T. Composite:	

Section 4 – Financial Information - Are you presently employed? 🗖 Yes; 🗖 No

Employer	Full-Time	Salary?
	Part-Time	

Section 4B – Other Scholarships Applied For and/or Received

1.	
2.	
3.	

<i>Please briefly address the following:</i> 1. List your plans to earn money to further your education; 2. List any social activities, clubs, or organizations and your involvement in each (past or present); and 3. Brief Statement of Educational Goals:
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You can attach an additional page if necessary or your resume