



Americans of Italian Origin Society

Scholarship Application

1. ELIGIBILITY QUALIFICATIONS:

- a) Parent(s) must be active member(s) of A.I.O. for at least one year, and must attend at least 2 General Meetings of that year.
- b) Applicant must have at least 3.5 grade point average (4.0 scale) and must maintain 3.5 with a minimum of 12 semester hours for requalification for second semester funding.
- c) Applicant must be accepted to a two or four year fully accredited college or university.
- d) Eligibility will include current year high school graduates, those already enrolled in college or university, or those entering a graduate or professional degree program.
- e) Each candidate is allowed to receive the award up to four times.

2. Awards are granted in the amount of \$1,000 total. A repeat application may not be accepted after a previous award, based on the total number of new applications received.

3. Complete all pages of the application, sign, date and return **NO LATER than June 1st.**

4. Include all documents as indicated on the application form, including recent letters of recommendation (2), and transcripts (4). Recommendation letters and original transcripts must be included with application or sent separately by the required due date.

5. Applications that are not filled out correctly or not completed **WILL NOT BE CONSIDERED.**

6. Awards are presented By A.I.O. Board at the Annual A.I.O. Picnic.

7. Decision of the Review Committee and A.I.O. is final.



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APPLICANT INFORMATION

Last Name _____ First Name _____ M.I. _____

Date of Birth (mo/day/year) _____

Street Address _____ Apt/Unit # _____

City _____ State _____ Zip Code _____

Home Phone Number _____ E-Mail _____

Social Security No _____

High School _____ Date of High School Grad _____

High School Address (City and State) _____

Please list any scholastic honors that you have received (if applicable):

1. _____ 5. _____

2. _____ 6. _____

3. _____ 7. _____

4. _____ 8. _____

Please list any extracurricular activities in which you are, or have been involved in:

(Name of Organization, Dates of Participation, Offices held, Honors or recognition)



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Name of college or university you are attending, or plan to attend:

Major field of Study

Date of application to this college (mo/date/year) _____

Date of Acceptance _____

List any other scholarships you have applied for:

(Name of Scholarship, Application Accepted, Amount of Scholarship)

Have you been awarded any other scholarships? Yes _____ No _____

SPONSOR INFORMATION

Last Name _____ First Name _____

Date sponsor joined AIO? (mo/day/year) _____



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REFERENCES

(Give names of the people indicated, and names of three others not related to you)

School Counselor:

Full Name _____ Address _____

Phone Number (_____) _____ - _____ Years Known _____

Ref 1:

Full Name _____ Address _____

Phone Number (_____) _____ - _____ Years Known _____

Ref 2:

Full Name _____ Address _____

Phone Number (_____) _____ - _____ Years Known _____

Ref 3:

Full Name _____ Address _____

Phone Number (_____) _____ - _____ Years Known _____

Ref 4:

Full Name _____ Address _____

Phone Number (_____) _____ - _____ Years Known _____

Ref 5:

Full Name _____ Address _____

Phone Number (_____) _____ - _____ Years Known _____



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THE FOLLOWING DOCUMENTS NEED TO BE ATTACHED TO THIS APPLICATION

1. Four (4) copies of high school transcript. If you are currently attending college, then use your most recent college transcript. If you attend or are attending more than one school, please include transcripts from all schools.
2. Written references from those people indicated by you.
3. Secondary school acceptance of enrollment if you are graduating from high school.
4. A 250-word minimum, biographical essay which should include the reasons why you feel you deserve this scholarship.
5. A passport size photograph.

****You also must meet the qualifications as indicated on the sheet(s) attached to this application**

DISCLAIMER AND SIGNATURE

I certify that all the information provided in this application is complete and accurate to the best of my knowledge. I understand that all the information in this application will be verified, and that any willful misrepresentation will cause my application to become ineligible for consideration.

Signature of

Applicant _____ **Date** _____

Please mail the completed application and all of the accompanying documentation as listed above to:

**Mrs. Joanne Boesiger
20384 Danbury Ln.
Harper Woods, MI 48225**