Northern New York Volunteer Firemen's Association, Inc. Scholarship Application – 2019

APPLICATION FOR SCHOLARSHIP DATE: / /201

PLEASE TYPE OR COMPUTER GENERATE ONLY: MAY BE SUBMITTED ELECTRONICALLY.

NAME:			PHONE:			
ADDRES	S:					
CITY:		STATE:	N.Y	ZIP:	DATE OF BIRTH:	
CITY OF	RESIDENCE:					
FIRE DEI	PARTMENT:					
APPLICA	NTS AFFILIATION TO FIR	E SERVICE	MEME	BER:		
NAME C	F SCHOOL:				GRADE:	
NAME C	F SCHOOLS APPLIED TO	AND ACC	EPTED:			
MOTHE	R'S NAME:					
FATHER	'S NAME:					
BEFOR	E SUBMITTING THIS API	PLICATION	THE FO	OLLOWIN	NG REQUIREMENTS MUST BE INCLUDED TO QUALII	
(1)	A 250-300 WORD ESSAY	ON YOUR	PROPO:	SED COUF	RSE OF STUDY, FINAL CAREER GOAL (essay on separate sheet	
(2)	A LIST OF ALL COMMUN	WORD ESSAY ON YOUR PROPOSED COURSE OF STUDY, FINAL CAREER GOAL (essay on separate sheet) ALL COMMUNTIY SERVICE ACTIVITIES ON SEPARATE SHEET.				
(3)	A LIST OF ALL SCHOOL ACTIVITIES ON SEPARATE SHEET.					
(4)	A LIST OF ALL SCHOOL ACTIVITIES ON SEPARATE SHEET. A LETTER FROM FIRE CHIEF, PRESIDENT OR CURRENT OFFICER VERIFYING MEMBERSHIP OF SPONSOR.					
(5)	A LETTER OF RECOMMENDATION FROM A TEACHER, PRINCIPLE, ETC.					
	(Use addit	ional pages	if neede	d and atta	ach to application.)	
		(FOR	соммі	TTEE USE)):	
DATE AP	PLICATION RECEIVED:		DAT	E ACTED L	UPON:	
RECOMMENDATION OF COMMITTEE MEMBERS:			:		ACCEPTED FOR SCHOLARSHIP:	
REJECTED	FOR SCHOLARSHIP:		NOTIFIC	CATION OF	F APPROVAL:VOUCHER	
DATE:						
CHECK DATE:		SEN	T DATE:			

Please return to: Laurie Hance, 162 Judson St. Rd, Canton, NY 13617 E-mail: hancefamily162@hotmail.com