

***Festa Italiana di Vandergrift, Inc.***  
***Vince Putignano Memorial Scholarship Criteria***

**PURPOSE:**

The purpose of the Festa Italiana di Vandergrift, Inc. Scholarship is to assist graduating high school seniors of Italian descent who live in or who have or had a parent as a resident of the 15690 Zip Code. The intent of the scholarship is to provide financial assistance to students who show a love of their Italian Heritage and will continue their education at some type of secondary education. The scholarship is a one year, one payment scholarship.

**GENERAL DESCRIPTION OF SCHOLARSHIP:**

1. The scholarship is open to all graduating high school seniors who reside in the 15690 Zip Code or have a Parent who has lived in the 15690 Zip Code for at least one year.
2. The applicant must be in his or her senior year of high school at the time of the application and eligible for high school graduation.
3. The application must have at least one parent of Italian descent and said parent must currently be or during their life, have been, for a period of excess of one year, a resident of the 15690 Zip Code.
4. The student applicant must complete an official application available from the high school guidance counselor.
5. The number and the amount of the one time scholarship shall be announced annually by the Selection Committee through the submission of the information to the guidance counselors.
6. All decisions by the Selection Committee are final.

**APPLICATION DEADLINE:**

The deadline is April 1, 2020. Applications must be mailed to:

Scholarship Committee  
Festa Italiana di Vandergrift, Inc.  
Post Office Box 115  
Vandergrift, PA 15690

**APPLICATION FOR FESTA ITALIANA DI VANDERGRIFT, INC.  
VINCE PUTIGNANO MEMORIAL SCHOLARSHIP  
DEADLINE: WEDNESDAY, APRIL 1st, 2020**

NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

Is at least one of your parents of Italian descent? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, which parent (name): \_\_\_\_\_

If it is your mother – please state her maiden name: \_\_\_\_\_

Have they lived in the 15690 Zip Code? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, when did they: \_\_\_\_\_

**HIGH SCHOOL ATTENDED:**

<u>YEAR</u>	<u>SCHOOL</u>	<u>DATES</u>
9 <sup>th</sup>	_____	From _____ to _____
10 <sup>th</sup>	_____	From _____ to _____
11 <sup>th</sup>	_____	From _____ to _____
12 <sup>th</sup>	_____	From _____ to _____

List student activities, leadership positions, athletic and/or community involvement:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

At what college, university or post-secondary are you seeking admission?

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

What will your major be? \_\_\_\_\_

Write a 500-word essay on the importance of your Italian Heritage in personal experiences. (Please use separate paper and type the essay if able to do so).

The information provided in this application and included in the attachments is to the best of my knowledge, true and accurate.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

Guidance Counselor's signature \_\_\_\_\_ Date \_\_\_\_\_

SEND COMPLETED APPLICATION TO:

Scholarship Selection Committee  
Festa Italiana di Vandergrift, Inc.  
Post Office Box 115  
Vandergrift, PA 15690