



BARRY VASIOS MEMORIAL SCHOLARSHIP APPLICATION

INSTRUCTIONS:

1. This application must be completely filled in by the applicant.
2. Return this application to Henry Cenicola, hcenicola@aol.com, by **May 11**.
3. Applicant must be a graduating High School Senior.
4. Scholarship will be paid to the recipient upon proof of enrollment.

COMPLETE THE FOLLOWING INFORMATION:

1. Name of Applicant _____
(Last) (First) (Middle)
2. Home Address _____
(Number/street) (Town) (tel.no.)
3. Date of Birth _____
(Month) (Day) (Year)
4. Name of High School Attended _____
5. Class Rank# _____
6. S.A.T. Score: Verbal ___ Math ___ (attach copy of high school transcript)
ACT Score: _____ (attach copy of SAT/ACT score if not included on transcript)
7. Father's Name _____ Occupation _____
Address _____
8. Mother's Name _____ Occupation _____
Address _____
9. Parent's Marital Status ___ Married ___ Divorced ___ Separated

10. List Brothers, Sisters and other dependents supported by your parents:

Name	Address	Relationship	Age
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11. List School Activities: Include such activities as music, athletics, class officer, etc. Indicate the number of years participated. Attach additional sheet if necessary.

ACTIVITY	POSITION	YEARS	SUPERVISOR	PHONE#
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12. List Community Activities: Include such activities as scouting, church organizations, service activities, etc. Attach additional sheets if necessary.

ACTIVITY	POSITION	YEARS	SUPERVISOR	PHONE#
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13. List work experiences:

EMPLOYER	POSITION	YEARS	SUPERVISOR	PHONE#
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

14. List any special recognition/awards that you have received.

15. What course of study do you plan to take in college?

16. Which university do you intend to attend?

- Brown ____
- Columbia ____
- Cornell ____
- Dartmouth ____
- Harvard ____
- Princeton ____
- Rutgers ____
- University of Pennsylvania ____
- Yale ____

