



Seventh Ward Citizens Coalition, Inc.

2008 Board of Directors

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Application for \$500.00 Scholarship (Application Deadline is June 1, 2008)

All applicants must have a grade point average of 2.5 or above and be a resident of Youngstown's 7th Ward.

Please provide:

Three letters of recommendation from non-relatives. (At least one letter must be from a teacher or other school personnel and at least one from someone not in the education field.)

A typed 300 - 350 word essay (Approximately 1.5 pages.) detailing how you see yourself giving back to the Youngstown community and your goals for the future.

Applications and other materials must be *postmarked not later than April 15, 2006* and returned to:

**Scholarship Committee
7th Ward Citizens Coalition
3608 Beechwood Place
Youngstown, Ohio 44502**

Thank you for your interest in our scholarship. You will be notified of our selection by mail and the scholarship will be awarded at the Coalition meeting in August.

All information will be held in strict confidence.

NAME: _____

HIGH SCHOOL: _____

ADDRESS: _____

COURSE OF STUDY: _____

GPA: _____

Telephone No. _____

CLASS RANK: _____

Mother's Name: _____

Father's Name: _____

Do you have any relatives or friends that are members of the 7th Ward Citizens Coalition?
If yes, please provide their name and relationship: _____

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Please *attach a copy of your resume* and *your high school transcript*. If you do not have a resume, please answer the following questions. (You may attach your answers or additional sheets if needed.)

1. In what extracurricular activities have you participated and what positions have you held in those activities? _____

2. What is your work experience? _____

3. What awards have you received and from whom have you received them? _____

4. Please list all volunteer activities in which you have been involved. _____

5. What college, university or technical school do you plan to attend? _____

I affirm that the information herein is true to the best of my knowledge.

Student's signature

Guidance Counselor's Signature: _____

This Application May be Duplicated as Often as Necessary
(Revised 2/2006)