

The Michael J. Cerroni Foundation Inc.

24945 County Route 37, Carthage NY 13619

(315) 493-4023

web: www.michaelcerroni5k.com * email: fortitude@michaelcerroni5k.com

SCHOLARSHIP APPLICATION

QUALIFICATIONS

- Applicant must be a graduating Senior of Carthage Central High School.
- Students attending college, technical school or entering military service are eligible to apply.
- Selection for scholarships is based upon **academic achievement, personal data** and a completed **essay**.
- **Scholarship amount(s)** are determined by the Executive Board of Directors at the annual meeting.

INSTRUCTIONS

- Read all materials completely so that you understand what is available, the criteria, and what is expected of you. Incomplete applications will not be considered.
- Complete by neatly printing or typing your **application, personal data** and **essay**.
- Write your **essay**, answering what Fortitude means to you and how you took a stand to make a change, and include it with your application.
- Include three letters of reference with your application.
- Request that your **school** send the Foundation an **official transcript** of your grades to date.
- Proofread your application and check it for completion. Mail or hand deliver your application, including your essay, letters of reference and transcripts to the Michael J. Cerroni Foundation at the address listed below no later than **May 1st**. Applications postmarked after the deadline will not be considered. *Do not e-mail your application.*

Michael J. Cerroni Scholarship Fund
C/O Carthage Central High School
Attn: Guidance Dept.
36500 NYS Rte 26 Carthage, NY 13619

Notification of Scholarship Winners will be announced at Senior Awards Night in June.

The Michael J. Cerroni Foundation Inc.

SCHOLARSHIP APPLICATION

Applicant Name: _____ Gender: _____

Address: _____

Phone: _____ E-Mail: _____

Parent/Guardian Name: _____

Parent/Guardian Name: _____

Attach three letters of reference and list contact information below:

Name: _____ Phone: _____

Relationship: _____

Name: _____ Phone: _____

Relationship: _____

Name: _____ Phone: _____

Relationship: _____

Detailed description of post High School Plans (college, military, vocational academy, field of study, etc.):

Tell us a little about who you are:

Please list and describe your non-course mandated extracurricular activities and achievements:

Please list and describe your non-course mandated Community Service activities:

Foundation use only

Applicant: _____

Pg. _____ of _____

How did you learn about our scholarship program?

Please write a brief 1-2 page essay explaining what the word “Fortitude” means to you and how you took a stand to promote positive change. Provide an example of when you’ve displayed fortitude in your lifetime and how you will apply it in your future.

Request that your Guidance Counselor send an official transcript of your academic record to the Michael J. Cerroni Foundation, Inc.

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

I understand that if the circumstances under which my scholarship was awarded change, I must notify The Michael J. Cerroni Foundation immediately.

Applicant Signature: _____

Date: _____

Application Deadline: May 1st

Applications postmarked after that date will not be considered.

Application Checklist:

- _____ Completed Scholarship Application
- _____ Letters of Reference
- _____ Fortitude Essay
- _____ Official Transcript

Foundation use only

Applicant: _____

Pg. _____ of _____