SCHOLARSHIP APPLICATION

SECTION I: Background Information

Student's Name						
	La	st	First		Mi	ddle
Male:	Female:	Date of Birth:		Social S	Security #: _	
Parent's Name	s: Father			other		
Number of chi		cluding yourself:			ttending col	lege at this time:
	-				_	
Parent's Telep	hone Number: (_	Т	Text: Y/N	Parent's Ema	ıil:	
Is father of Ital	ian descent?	Is mother of I	talian desc	ent? W	/ere you bor	n in Italy?
From which pa	rt of Italy does y	our ancestry origina	ate?			
Please list any	financial difficult	y:				
SECTION II: A	cademic Infor	mation				
Current Status:	[] High School	Senior [] Under	graduate	[] Master's (Candidate	[] Doctoral Candidate
Name of forme	r/current high sc	hool:			Graduation	Year:
Name of anticip	pated/current co	llege or university:				
College Major(s	s):				Grade Point	Average:
Do you speak It	alian? [] Yes [] No Do you write	e Italian? [] Yes [] No		
Have you previ	ously received a	WVIHF Scholarship	? []Yes	[] No		

Office: 304.622.7314 Fax: 304.622.5727

wvihf@wvihf.com

www.wvihf.com

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SECTION III: Financial Information

Family Income (individual income, if student	is independent of parents)	
[] 0-\$9,999	[] \$10,000-\$25,999	[] \$26,000-\$50,999
[] \$51,000-\$75,999	[] \$76,000-\$99,999	[] Over \$100,000
Amount owed by student per year for colleg Total expenses Subtract student aid & awards Total amount owed to college	se \$ \$ \$	
SECTION IV: Essay		
In 250 words, please describe the Italian-Amaspirations. [If necessary, attach a separate		u in terms of your goals and
In 250 words, describe an outstanding Italian community at large. [If necessary, attach as		ou feel has influenced the

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REQUIRED ATTACHMENTS TO APPLICATION

- Registration fee: \$10.00 payable to "WVIHF Scholarship Program."
- Any necessary essay attachments.
- Sealed official transcript (1 copy).
- Letter of acceptance to college or graduate school (for high school & college seniors only).
- Names and addresses of your school newspaper and two (if possible) hometown newspapers.
- One photo (head and shoulder area only, color or black/white)
 - o Photo will be sent to the media if you are selected to receive a scholarship
 - o Photo will not be returned; digital copy may be emailed to wvihf@wvihf.com

THIS APPLICATION MUST BE POSTMARKED NO LATER THAN FEBRUARY 1, 2020.

MAIL COMPLETED APPLICATION TO:

WVIHF Scholarship Program PO Box 1632 Clarksburg, WV 26302 Phone: 304-622-7314

Email: wvihf@wvihf.com

All winning applicants will be notified by May 2020.

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Student's Signature		

Scholarship funds will be sent to the learning institution at the beginning of August 2020.

340 West Main Street PO Box 1632 Clarksburg, WV 26302

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