NEW YORK CONFERENCE OF ITALIAN-AMERICAN STATE LEGISLATORS

Assemblyman James D. Conte Memorial Academic Scholarship

DUE MARCH 29th, 2019

You may apply for this scholarship **ONLY** if you:

- 1) have demonstrated a grade point average of 85 and over,
- 2) have good conduct and demonstrate the dedication to pursue and complete a higher education degree,
- 3) are active in community service and extracurricular activities, and
- 4) can demonstrate financial need.

Name:			
Last	First	Middle	
Home Phone Number	Alternate	Phone Number	_
Mailing Address:			
	Str	eet	
City	State		Zip Code
State Senate Representative:			
State Assembly Representative	e:		
Academic & Achievement Information: College or University you will be attending in 2019-2020:			
School Name	City	State	
Enrollment status for 2019-2020:	Freshman	Sophomore	_JuniorSenior
Major 2019-2020(include minor if applicable)			
Cumulative GPA	Expected date of graduation:		
Athletic and Extracurricular Activit	ies:		

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ACADEMIC SCHOLARSHIP

Financial Information: List all college scholarships and/or financial aid (grants, loans, work study, etc.) you have previously received or are currently receiving: Scholarship or Financial Aid **Academic Year** Amount **Additional Information:** Please attach the following: 1) A brief biography listing honors received, volunteer service activities, clubs, extracurricular activities, etc. A brief outline of your educational goals. 2) A brief outline of your financial need. 3) A brief essay (500 words) on a current public issue of interest. 4) 5) A school transcript indicating your GPA (incoming freshman must provide a high school transcript and college acceptance letter). I have verified my application and understand that it will be disqualified if late, incomplete, inaccurate, or unsigned. FOR STATE CONFERENCE LEGISLATORS OFFICE USE ONLY: Date Application Received:

(Please date stamp)

Staff Member's Signature: