San Remo Civic Association P.O. Box 141 Kings Park, NY 11754

Scholarship Application

Date	_ Graduation Date			
Name		Age	Phone	
	·			_
Name and addre	ess of family member in th	he San Rer	no Civic Association	
	currently attending			_
What school do y	you plan on attending aft	er graduation	on	
	s you are currently involve			
List any awards	you have received during	g your high	school years	_
	nity service activities, incl			— — emo Civic Association —

On a separate piece of pareducation and anything els		utlining your goals for fur	thering your		
Signature					
TO BE COMPLETED BY THE APPLICANT"S GUIDANCE COUNSELOR:					
Guidance Counselor		Phone	_		
SAT Score	_ ACT Score	Class Rank	_		
Comments					
Signature of Counselor		Date			