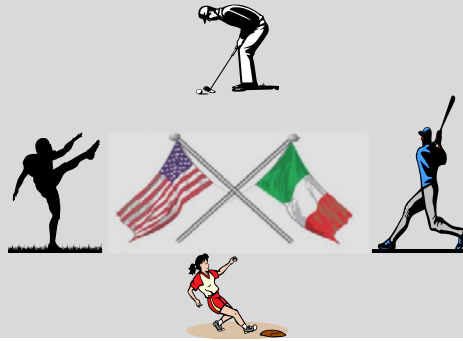


The Mahoning Valley



Italian-American Sports Hall of Fame

THE MAHONING VALLEY ITALIAN-AMERICAN SPORTS HALL OF FAME

Re-established as an Independent Organization, Under IRS 501-(c). (3), Non-Profit Organization, 2002 (Previously a Chapter of the N.I.A.S.H.F. Originally organized in 1986)
Corporate Address 358 North Cleveland Avenue Niles, Ohio 44446-3812

Mr. Stephen A. Telego, Sr., President can be contacted at 330-718-1467 Email: stelegosr@aol.com

SCHOLARSHIP APPLICATION ▪ **MUST BE POSTMARKED ON OR BEFORE APRIL 6, 2019**
Scholarship Questions should be directed to Mr. Stephen A. Telego, Sr. President
330-979-6596 or email at stelegosr@aol.com

Instructions:

1. Letter of acceptance to college/graduate school (for high school seniors, undergraduate seniors)
2. Four (4) Letters of Recommendation (from teacher(s), coach(es), administrators, employer, or non-relative(s))
3. Essay (One typed page on how you have contributed to your school and community)
4. Sealed Official transcript (One copy only)
5. Attachments - Please attach items 1,2,3 and 4 to this application:

**MAIL THIS APPLICATION & ATTACHMENTS FOR SCHOLARSHIP CONSIDERATION TO THE OFFICE OF THE SCHOLARSHIP CHAIRMAN,
Mr. Dan W. Titi, Sr. Scholarship Chairman - 709 Roselawn N.E., Warren, OH 44483**

THE MAHONING VALLEY ITALIAN-AMERICAN SPORTS HALL OF FAME PROVIDES SCHOLARSHIP FUNDING TO WORTHY STUDENTS OF ALL
BACKGROUNDS REGARDLESS OF RACE, CREED, NATIONAL ORIGIN, SEX, AND PHYSICAL DISABILITY

Name: _____ Date of Birth: _____

Address: _____ City _____ State _____ Zip _____

Home Phone: _____ Cell Phone: _____ Email: _____

Last Four Digits of Your Social Security Number: _____

High School Name: _____ Graduation Year: _____

School Address: _____ City _____ State _____ Zip _____

School Guidance Contact (Name): _____ Email: _____

School Phone: _____ Guidance Contact Phone: _____

Father's Name: _____ Occupation: _____

Mother's Maiden Name: _____ Occupation: _____

Names and Ages of Other Family Members: _____

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G.P.A.: _____ Year in School: _____ Date of Graduation: _____

A.C.T.: _____ S.A.T.: _____ Class Rank: _____

Academic Reference (Name): _____ Phone: _____ Email: _____

Athletic Reference (Name): _____ Phone: _____ Email: _____

What Sport(s)*** have you participated in? _____

Sport(s) ***and Year(s) lettered: _____

Honors and Achievements: _____

*** Applicant may be considered for participation in any school sport, cheerleading or band/musical.

Approximate family income (Net): _____ \$ Are you or your family receiving any additional support? Yes/ No

Are there other children in the family? Yes / No If Yes, please list ages: _____

Are other Family members currently attending college? Yes / No If yes, how many? _____

What are your goals for the future? _____

How best would you describe peer group involvement and leadership qualities: _____

What have you done for your community? (Volunteering, Civic groups, etc.) _____

Additional Comments (use additional sheets if necessary):

Signature: _____ Date: _____

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