 

**GENERAL FEDERATION *of* WOMEN’S CLUBS MASSACHUSETTS**

**Lynne M. Stader, President**

**2020 WOMEN'S  ITALIAN CLUB OF BOSTON SCHOLARSHIPS of $1000**

**REQUIREMENTS**:

 **(A)** **Scholarships of $1000 for undergraduate study.**

* Applicant must be a senior in a Massachusetts high school or home schooled and have achieved the standards for graduation set by the town of residence.
* Completed application form postmarked no later than **March 1, 2020**.
* Personal statement of no more than 500 words addressing her/his Italian heritage,personal and

professional goals, and work and volunteer experience.

* Two letters of recommendation from teachers or counselors relevant to this award, not college application.
* Official transcript of high school grades.

**(B) Scholarship of $1000 for undergraduate (college Sophomore or Junior) major in Music.**

* Completed application form postmarked no later than **March 1, 2020**.
* Personal statement of no more than 500 words addressing her/his Italian heritage, personal and

professional goals, work and volunteer experience.

* Letter of recommendation from Music Department Head.
* Official college transcript.
* No audition is required.

**Original packet** and **two** additional copies required for both scholarships.

**SEND ENTRY TO:** GFWC MA Scholarship Chairman

 P.O. Box 679, Sudbury, MA 01776-0679

 Attention: Women’s Italian Club of Boston Scholarship

**If you have any questions or for further information, please email** **HQSecretary@gfwcma.org**

Failure to comply with any of the above requirements will result in disqualification.

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**2020** **WOMEN’S ITALIAN CLUB OF BOSTON SCHOLARSHIP**

Application Form (Print/Type)

Name \_\_\_\_\_\_\_\_\_\_\_ Tel. # \_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_

City, Zip Code \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ E-mail

Name of high school/college attending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Scholarship applying for: (A) \_\_\_ (B) \_\_\_

Colleges to which you have applied (for applicants for undergraduate scholarship):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ Accepted: Yes ❑

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ Accepted: Yes ❑

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ Date: