

Application for  
HICKSVILLE VOLUNTEER FIREMEN'S ASSOCIATION, INC.  
MEMORIAL SCHOLARSHIP

Name \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of birth \_\_\_\_\_ I graduated/will graduate from  
\_\_\_\_\_ on \_\_\_\_\_

Cumulative grade point average? \_\_\_\_\_ On what scale? \_\_\_\_\_

Are you applying for the 2-year or the 4-year program? \_\_\_\_\_

What school or university do you plan to attend? \_\_\_\_\_

What do you plan to major in? \_\_\_\_\_

1. List any activities or participation that you have had with providing a service to the school, community, etc.

2. Briefly explain your career goals.

3. List any extracurricular activities that you participated in during your high school years and any outstanding awards.

4. List four references who will recommend you for this scholarship. (List must include names of two teachers that you have had classes with in the past two years. Remainder may be teachers, minister, employer or close adult friend. Please show address for each.)

Name

Phone Number

_____	_____
_____	_____
_____	_____
_____	_____

5. List any additional information that you or your parents feel would assist the scholarship committee in their decision. (Example: Unusual financial circumstances, etc.)

6. As parents/guardian of the applicant, it is with our permission that our child/dependent submits this application. If deemed necessary, the scholarship committee has permission to review high school grades.

Father Signature \_\_\_\_\_ Occupation \_\_\_\_\_

Mother Signature \_\_\_\_\_ Occupation \_\_\_\_\_

Applicant Signature \_\_\_\_\_

If any additional space is needed for any response on this application, please use the back of the sheet.