



# The Tony Gentile Memorial Scholarship Fund Application

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Application postmark deadline 04/28/2017

Completeness and neatness ensure your application will be reviewed properly.

### Applicant Data

Last Name \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Permanent \_\_\_\_\_ Apartment \_\_\_\_\_  
Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Email \_\_\_\_\_

Are you a U.S. citizen or legal resident? Yes \_\_\_ No \_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Please indicate your status (For statistical purposes only) Male \_\_\_ Female \_\_\_

Hispanic/Latino                       Black/African American                       Multi-Racial  
 Asian                                       Native Hawaiian/Pacific Islander                       White  
 American Indian/Alaska Native

### High School Data

School Name \_\_\_\_\_ City: \_\_\_\_\_

High School Graduation Date: Month \_\_\_\_\_ Year \_\_\_\_\_ School Telephone: ( ) \_\_\_\_\_

### Post Secondary School Data

Name of post secondary school you plan to attend. Use official school names. Do not use abbreviations.  
(If unknown, please list in order of preference the schools to which you have applied.)

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

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

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

Major Course of Study: \_\_\_\_\_

Expected Graduation Year: \_\_\_\_\_

Sending a resume does not replace any part of this application. If space provided in any sections is inadequate, you may continue on additional sheets. Attachments must follow the same format. DO NOT repeat information already reported on the application form. Your name, address and name of this scholarship program should be included on all attachments.

**Work Experience**

Describe your work experience during the past four years.

Employer/Position	From- Mo/Yr	To- Mo/Yr

**Activities, Awards and Honors**

List all school and community activities in which you have participated during the last four years.

Note all special awards, honors and offices held.

Activity	No. of Years Partic.	Special Awards, Honors	Offices Held

**Essay (required)**

On a separate sheet of paper, please respond to the following topic. Applicants who do not specially address this topic will not be considered. Your essay should be 500 words or less.

Include your name and address at the top of each page.

**The essay topic:**

**Describe how you have helped to support the ideals and goals of the Helping Hands Foundation and Tony Gentile. Through activities like volunteer work, Boy Scouts or Girl Scouts, school clubs, religious education, or even job experience, explain how you have helped to make Long Island the best it can be.**

(Information about Mr. Gentile can be found on the Helping Hands Foundation website: [www.HelpingHandsLI.org](http://www.HelpingHandsLI.org))

## Transcript Information

All applicants must include a high school transcript of grades and have this section completed by the appropriate school official.

Applicant ranks \_\_\_\_\_ in a class of \_\_\_\_\_

Cumulative Grade Point Average: Weighted \_\_\_\_\_ Unweighted \_\_\_\_\_

School Official's Signature \_\_\_\_\_

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

Title: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

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## Certification

The Helping Hands Foundation has the responsibility for selecting recipients based on criteria as set forth in the program description. This application becomes the property of the The Helping Hands Foundation.

I acknowledge decisions are final. I certify that I meet the eligibility requirements of the program as described in the

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

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