Vincent Linguanti Memorial Scholarship Fund

30 Orchard St., Spring Valley, NY 10977

The Vincent Linguanti Scholarship was instituted in memory of Vincent Linguanti in February 2007 for the purpose of annually providing monetary assistance to an individual attending a college or university of their choice.

Requirements for Scholarship:

- Must have one hundred hours of documented volunteer service in a local fire department, ambulance corp., or a police youth academy.
- Must have a grade average of 75 or above throughout sophomore and junior year.
- Must be accepted to an accredited two or four Year College or University.

Procedures:

- Complete all information requested on the application form. Including a recommendation from two teachers, a guidance counselor or school principal, and chief or head of the fire department, ambulance corp., or police youth academy. (see attached forms)
- Provide a high school transcript proving grade average for sophomore and junior year.
- Provide written proof of one hundred accumulative volunteer hours, including a contact name and phone number. Hours volunteered through April 30th of your senior year will be counted.
- Provide a copy of letter of acceptance to any two or four year college or University. This must be given after chosen to receive the scholarship.
- Provide a 250 word essay pertaining to the topic: **"While continuing your education where do you see yourself as a volunteer like you were in the past?"**
- Please submit the application to your school guidance counselor or head of department for their endorsement and they will forward the application.

Vincent Linguanti Memorial Scholarship Fund

30 Orchard St., Spring Valley, NY 10977

Please complete all information on the form and obtain all required signatures. Return the form to your school guidance counselor for their endorsement.

Applicant Information

Last Name _____ First Name _____ MI ____

Home Mailing Address _____

City _____ State _____ ZIP _____

Telephone _____ Social Security Number _____

Date of Birth _____ School Name _____

Applicants Signature _____ Date _____

Parent or Guardian Information (If there is more than one parent/guardian, both should complete information requested below)

Mr. Mrs. Ms. Last Name _____ First Name _____ MI _____

Home Mailing address (if different from applicant's) _____

City _____ State _____ ZIP _____

Telephone _____ Relationship to Applicant _____

Mr. Mrs. Ms. Last Name _____ First Name _____ MI _____

Home Mailing address (if different from applicant's) _____

City _____ State _____ ZIP _____

Telephone _____ Relationship to Applicant _____

Counselor Report

Request your school principal or guidance counselor to complete this section.

Educator's Name _____

Telephone (Day) _____ Evening _____

How long have you known this student? _____

Please comment on why this student should receive this scholarship:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature: _____

Position: _____

School: _____

Teacher Report

Request your teacher to complete this section.

Educator's Name _____

Telephone (Day) _____ Evening _____

How long have you known this student? _____

Please comment on why this student should receive this scholarship:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature: _____

Position: _____

School: _____

Teacher Report

Request your teacher to complete this section.

Educator's Name _____

Telephone (Day) _____ Evening _____

How long have you known this student? _____

Please comment on why this student should receive this scholarship:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature: _____

Position: _____

School: _____

Chiefs Report

Request your department head or chief to complete this section.

Educator's Name _____

Telephone (Day) _____ Evening _____

How long have you known this student? _____

Please comment on why this student should receive this scholarship:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Signature: _____

Position: _____

School: _____