



Italian Workmen's Club

914 Regent Street, Madison, WI 53715

ITALIAN WORKMEN'S CLUB SCHOLARSHIP

Each year the Italian Workmen's Club of Madison, Wisconsin will present \$5000 in scholarships to seniors who are graduating from a Dane County high school. Seniors intending to go to a four year program of higher education are eligible for awards as high as \$2000. Seniors who intend to pursue a two year degree in a technical or vocational program are eligible for awards as high as \$1000.

ELIGIBILITY

To be eligible for the Italian Workmen's Club Scholarship, applicants must meet the following requirements:

1. Be a senior in a Dane County high school or the immediate family member (son/daughter, grandson/granddaughter) of an IWC or IAWC member.
2. Intend to go on to higher education (higher education is considered enrolling in a course of at least two-year duration at a college, university or technical school which has as its objective the securing of a degree in advance of a high school diploma).
3. Intend to enroll as a full-time student at an institution of higher education
4. Must be of Italian descent. (Defined as having one parent, grandparent or great-grandparent of Italian ancestry OR having an Italian surname.)

BASIS OF AWARD

The Italian Workmen's Club Scholarship will be awarded to a student based upon the following criteria:

1. Scholastic ability (i.e. grades and class rank).
2. Need of the student for financial aid.
3. Contributions of the applicant to the school and/or community.
4. Two (2) letters of personal reference from school and/or community leaders.
5. Bonus Points for Association of the applicant's parents or other relatives with Italian Workmen's Club and/or the Italian American Women's Club.

AWARD PROCEDURES

- Applications shall be submitted to the Italian Workmen's Club Scholarship Committee on or before April 15th of the applicant's senior year.
- The Italian Workmen's Club Scholarship Committee will review applications. The Committee will determine winners on or before May 1st of that year.
- Determination of the winners will be at the sole discretion of the Italian Workmen's Club Scholarship Committee. A member of the Committee who has a relative applying for this scholarship shall not participate in determination of the merits of that relative's application.
- The winners of the scholarship shall be announced on or about June 1st of each year.



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SCHOLARSHIP APPLICATION FORM

****Failure to complete any section of this application will greatly diminish your chances of receiving a scholarship****

Name: _____ Date: _____

E-mail address: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Age: _____ Name of High School: _____

Grade Point Average (Include Transcript): _____ Class Rank: _____

Use additional pages if needed for the following questions:

List the name(s) of relatives who are **currently** active members of Madison's Italian Workmen's Club or Italian American Women's Club. **EXPLAIN THE FAMILY RELATIONSHIP BETWEEN THE APPLICANT AND THE CLUB MEMBER(S):**

List School Activities (include things such as offices held, honors, awards, etc.):

List Civic/Community (non-school) Activities and Offices Held:

Articulate educational/career plans **including school you plan to attend** (college, university, technical school):

How do you plan to finance further education? Include any special circumstances that require financial assistance:

Financial information supplied below will not be shared with anyone outside of the selection committee

Father's Name: _____

Father's Occupation: _____

Mother's Name (Maiden): _____

Mother's Occupation: _____

Family Income Last Year: _____

Brothers and Sisters at Home or attending a 2 or 4 year college (Names and ages):

EMPLOYMENT RECORD

Trace your employment record for the past three years:

Employer's Name	Dates Worked for Each	Rate of Pay	Hours Per Week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Personal Savings: _____

Signature of Applicant: _____

Signature of Parent: _____

To Submit Application:

- 1. Print application and complete** – Mail completed form and supporting documents to:
IWC Scholarship Committee
c/o Joseph Cabibbo
404 S. Fifth Street
Stoughton, WI 53589
- 2. Complete form electronically** – Email completed form to: cabibs@sbcglobal.net
and attach or mail supporting documents to above address.

Reminders:

****** Application Deadline: April 15 ******

- *Failure to complete any section of the application form will greatly diminish your chances of receiving a scholarship.
- *Two (2) letters of recommendation and a copy of your transcript must be mailed to above address by April 15.