



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.



Italian Workmen's Club

914 Regent Street, Madison, WI 53715

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: _____ Phone: _____

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:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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 Jason Mascitti

2608 Monroe St

Madison, WI 53711

2. **Complete form electronically** – Email completed form to: jason.mascitti@thrivent.com 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.