

West Virginia Italian Heritage Festival

340 West Main Street
P.O. Box 1632
Clarksburg, WV 26301
304-622-7314
304-622-5727
wvihf@wvihf.com
www.wvihf.com



SCHOLARSHIP APPLICATION

SECTION I: Background Information

Student's Name: _____
Last First Middle

Male: _____ Female: _____ Date of Birth: _____ Social Security #: _____

Parent's Names: _____
Father Mother

Number of children in family excluding yourself: _____ Number of children attending college at this time: _____

Parent's Home Address: _____

Parent's Telephone Number: (____) ____ - ____ Text: Y/N Parent's Email: _____

Is father of Italian descent? _____ Is mother of Italian descent? _____ Were you born in Italy? _____

From which part of Italy does your ancestry originate? _____

Please list any financial difficulty: _____

SECTION II: Financial Information

Family Income (individual income, if student is independent of parents)

0-\$9,999

\$10,000-\$25,999

\$26,000-\$50,999

\$51,000-\$75,999

\$76,000-\$99,999

Over \$100,000

Amount owed by student per year for college

Total expenses \$ _____

Subtract student aid & awards \$ _____

Total amount owed to college \$ _____



SECTION III: Academic Information

Current Status: High School Senior Undergraduate Master's Candidate Doctoral Candidate

Name of former/current high school: _____ Graduation Year: _____

Name of anticipated/current college or university: _____

College Major(s): _____ Grade Point Average: _____

Do you speak Italian? Yes No

Do you write Italian? Yes No

Have you previously received a WVIHF Scholarship? Yes No

If yes, please list the name of the scholarship received _____

SECTION IV: Essay

In 250 words, please describe the Italian-American who has most influenced you in terms of your goals and aspirations. [If necessary, attach a separate sheet.]

In 250 words, describe an outstanding Italian-American in West Virginia whom you feel has influenced the community at large. [If necessary, attach a separate sheet.]



REQUIRED ATTACHMENTS TO APPLICATION

- Registration fee: \$10.00 payable to "WVIHF Scholarship Program."
- Any necessary essay attachments.
- Sealed official transcript (1 copy).
- Letter of acceptance to college or graduate school (for high school & college seniors only).
- Names and addresses of your school newspaper and two (if possible) hometown newspapers.
- One photo (head and shoulder area only, color or black/white)
 - o Photo will be sent to the media if you are selected to receive a scholarship
 - o Photo will not be returned, digital copy may be emailed to wvihf@wvihf.com

THIS APPLICATION MUST BE POSTMARKED NO LATER THAN MARCH 1, 2019.

MAIL COMPLETED APPLICATION TO:

WVIHF Scholarship Program
PO Box 1632
Clarksburg, WV 26302
Phone: 304-622-7314
Email: wvihf@wvihf.com

All winning applicants will be notified by May 2019.

Scholarship funds will be sent to the learning institution at the beginning of August 2019.

Student's Signature _____