ONEIDA LAKE REGION Antique Automobile Club of America Syracuse, New York

Oneida Lake Region Scholarship

Objectives:

- To encourage and attract a younger generation in an effort to perpetuate the automotive hobby and our club.
- To encourage other members of the community to participate in this Scholarship program.

Criteria:

- The Scholarship is intended for graduating high school seniors with an interest in cars and intent to pursue an automotive related education at a recognized facility.
- Applicants must meet <u>all</u> of the criteria to be eligible for the Scholarship.
- Applicants must furnish proof of enrollment in a recognized post-high school educational or training program before any funds will be disbursed to the recipient.
- Applicants must complete a personal questionnaire including but not limited to his/her career goals, personal achievements, extra-curricular activities, plans for future education, and an essay as to why he/she is deserving of this scholarship.
- Applicants must be willing to give a brief report to the Oneida Lake Region of his/her progress during the first year of study.
- Evaluations and award will be the responsibility of the Scholarship Committee of the Oneida Lake Region.
- All applications will be kept confidential during the evaluation process and will be destroyed after the selection process has been completed.
- Those applicants chosen as finalists may be required to be personally interviewed by the Scholarship Committee as part of the selection process.
- The successful applicant will be notified by August 1.



ONEIDA LAKE REGION Antique Automobile Club of America

Syracuse, New York



SCHOLARSHIP APPLICATION

APPLICANT DATA
Name:
Address:
Phone: Date of Birth:
Name of Parent/Guardian
Address: (If different from Applicant)
SCHOOL DATA
High School Attended: Grad. Date
Address:
Name of Post-Secondary School for which scholarship is requested:
Address:
Above School is (check one): 4 year College/University () Vo-Tech () Community College () Other () Accredited? Yes () No ()
Enrolled () less than half-time () half-time or more () full-time
Major Field of Study Applicant will pursue:
Anticipated Date of Graduation/ (month/year)
TRANSCRIPT INFORMATION
Applicant must have the following section completed by the appropriate school official.
Applicant ranks in a class of Cumulative grade point average
School Official's Signature Title
(Date) (Date) (Date)

ADDITIONAL DATA REQUIRED:

- 1. Attach a <u>brief</u> biography which includes extra-curricular activities, hobbies, travel and work experience.
- 2. Briefly explain why you think you should be awarded this scholarship.
- 3. Please provide any other sources of financial assistance.
- 4. Please provide any brief additional comments you would like to make.
- 5. Please list two teachers/counselors we could contact about your qualifications. (Name & contact numbers)
 - A. _____
 - В. _____

APPLICANT CERTIFICATION

In submitting this application, I certify the information provided is complete and accurate to the best of my knowledge. Falsification of any information may result in termination of any scholarship granted.

Applicant's Signature

Date

Mail completed application to:

Robert Forbes 3045 Seal Road Marcellus, NY 13108-9645 Application Deadline is May 31