APPLICATION FOR MARY SANTELLA SWART SCHOLARSHIP FUND 2022-2023

(first) (middle)							(last)				
Email Address:							Date of Birth:				
Address:						Te	lephone Number:				
	& Street)	(City		(State)	(Zip)	1 1	repriore i tumber.				
Davidana Sandi											
From	ne past two years: To	•									
		Address									
								•			
					_]	Annual			
Family Status:	Name		Age	Present Occ	upation		Where Employed	Income			
Father:											
Mother:											
Sibling:											
Sibling:											
Sibling:											
bioning.	·	<u> </u>					<u> </u>				
Father's home address:											
Mother's home	address:				, , , , , , , , , , , , , , , , , , , ,						
Tiet all other in	ooms of nonentra										
Parent	come of parents:			Sources(s)			Annual Income				
								 .			
								· =			
List the last two	schools you atte	nded:									
From To Name of S				of School			Location				
								·			
					<u>l</u>		<u>\$</u>				
What course of	study do you inte	nd to pu	rsue and	d what professi	on or other voc	cation	do you intend to practi	ce?			
				***************************************			11-1-1-1				
·	 ·										
To what schools	s have you applied	d for adn	nission?	(In order of ch	oice, if accente	d. ple:	ase state)				
					.	, 1					
				,				70-74			
In what artes a	urrigular activitis	o have	ou no-4.	aimatada	· · · · · · · · · · · · · · · · · · ·						
In what extra-curricular activities have you participated?											
					#						
What honors or awards have you received in school?											
-											

what are your activities and n	es oui	side of school?				
For what other scholarships h	ave you ap	plied? (If award has been	ı made, please stat	e.)		
For the school you attend or p	olan to atte	nd, please list the approxi	imate costs per yea	nr:		
Name of School:						
Transc VI Dentovii			Annual Tuition	n	\$	
			Room and Boa	ırd	\$	
			Books, Clothin	-	\$	
			Miscellaneous		\$	
			Total Annu		\$	
Indicate below the sources of			our annual cost as	above:		
(a) Financial as	ssistance ir	om parents/relatives	\$			
(b)Applicant's	tatal cavin	ac C	.Φ			
		ed during school year	\$			
		ing school year			"	
		school authorities)	\$			
		r employment \$				_
		ed during school year	\$			
(c) Other schol	arships					
(f) All other so	urces (inch	refigner length of				
(5)	000 (121010	iding toutis)	\$			
Total annual	income an	ticipated	47		· · · · · · · · · · · · · · · · · · ·	
		•	\$			
						_
What is your previous work h	istory?					•
Do you expect to be employed						
		CERTIFICATION	A DDI ICIA NEE			
I hereby certify that Bank of America as Trustee if be paid directly to me. It is no to the school year in which if respectfully submit this appli statements contained herein co	y understa his applica leafion to t	nd that any funds made a ry Santella Swart Schola anding that (1) if this scho- tion is made, and (2) tha the Mary Santello Swart	available to me as rship Fund directl blarship is awarde t I will be able to	ly to the school on my beh	ool which I atter alf the funds wil	nd and will not il be applicable
Date:		Signature of Applicant				
•		FOREST END ON A PRINT COMP.				
We hereby declare that we have our knowledge and belief:	ve read the	RTIFICATION OF PAR answers contained in this	ENTS OR GUARI s application and t	<u>DIAN</u> hat they are	e frue and correc	t to the best of
Signature of Father	Date	Signature of Mother	Date	l g: .		
			Date	Signature of	of Guardian	Date
	·					
Please Note:						
 Return application, comple Attach latest available trais Attach a copy of the first p Forward application and a 	soe of non-	ents' and applicant's, if or the thickness of the state o		deral incom 3H SCF	ic tax return. 100L	

ATTENTION: DANIEL CORRADO
1601 W 23RD STREET
HAZLETON, PA 18201
RE: MARY SANTELLA SWADT

RE: MARY SANTELLA SWART SCHOLARSHIP FUND