



Polish Women's Alliance of America

Application Period: February 1, 2010 to March 15, 2010

Two (2) \$500 Awards Will Be Granted In This Category
2010 Academic Award For High School Seniors



District _____ Council _____ Group _____ Member Since _____

Student's Name _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone Number _____ E-mail _____

Name of High School _____

High School Address _____

City _____ State _____ Zip Code _____

School Phone Number _____

Social Security Number _____

Number of family members belonging to Polish Women's Alliance _____

What academic curriculum did you follow in high school and why?

Briefly list any of the school clubs or activities that you participated in during your senior year in high school:

Briefly list any community projects or activities that you participated in while in senior year of high school:

Be sure you review the requirements and include all attachments with this application. You must answer all questions, fill in all blanks, and include all required attachments, otherwise your application may be considered incomplete. Proceed to page 2.



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What are your immediate plans directly after high school? Explain _____

Note to applicant: By signing this application form, you understand and agree that all information submitted on this form is accurate, and that the essay is in your own words. You also agree to all conditions of the Scholarship Committee's Requirements for your High School Senior Year 2009-2010 and submit all required attachments with this application. Application Period: February 1, 2010 to postmarked March 15, 2010. If you are awarded a scholarship, you understand and agree that you must keep a minimum of \$3,000 insurance coverage with PWA in force for ten (10) years after receiving the last qualifying moneys with no outstanding loans or cash withdrawals against this qualifying policy, otherwise the amount of such grant may be deemed a loan and a lien, to the extent thereof, on the applicant-member's certificate or certificates. The decision of the judges is final and not subject to review.

APPLICANT'S SIGNATURE

PARENT/LEGAL GUARDIAN
SIGNATURE HERE
(If applicant is under age 18)

DATE _____

Parent/Guardian Name Printed Here

If you have any questions, you may call Ms. Sharon Zago, Vice President and Scholarship Chairman at toll free 1-888-522-1898 Ext. 208 or you may e-mail her at vpres@pwaa.org.

*SCHOLARSHIP COMMITTEE: SHARON ZAGO, VICE PRESIDENT AND SCHOLARSHIP CHAIRMAN
COMMITTEE MEMBERS: ANTOINETTE TRELA-VANDER NOOT, SECRETARY-TREASURER
DIRECTORS: DAWN MUSZYNSKI NELSON, HELEN SIMMONS,
MARCIA MACKIEWICZ DUFFY, FELICIA S. PERLICK
EX-OFFICIO VIRGINIA SIKORA, PRESIDENT*