

2024 Scholarship Application Michael J. Perry Memorial Scholarship

Name					
	(last)	(first)	(initial)		
A d days a s					
Address					
	(Street)	City/Town	State	Zip	
Date of Birth		Home Phone	()		
Vour F-Mail /	ddress (please print legibly)				

Parent's Football Association Membership (circle all that apply)

WNYCFO (Western NY High School) EAIFO (Local College) MAFOA (Mid-American Conference)

Official's Name _____ Official's E-Mail _____

College You Are Planning on Attending _

If you are undecided, please indicate that above. <u>It will be your responsibility</u> to contact the Community Foundation For Greater Buffalo @ 716-852-2857 when you have made your choice.

Note: This scholarship is open only to eligible family members of the above organizations. Only children of current members are eligible, <u>grandchildren of members</u> <u>and children/grandchildren of retired or ex-members are</u> <u>not eligible for this scholarship.</u>

PLEASE COMPLETE THE FOLLOWING SECTIONS

In the space below and on the next page, please tell us how you define character and what you feel you do to demonstrate good character *(you may use a separate sheet)*

High School Extra-Curricular Activities (List in Order of Interest to You)

1.	 5.	
2.	 6.	
3.	 7.	
4.	 8.	

Other Activities Outside of School (Church, Civic, Recreational, etc...)

If You Have Any Work Experience, List the Jobs That You Have Held

Include <u>2</u> Letters of Recommendation With This Application. Include a High School Transcript of Grades and Accumulated Average Signed by Your Guidance Counselor or Principal.

PLEASE READ THE FOLLOWING CAREFULLY

Michael Perry was a man of great character. He routinely put others needs ahead of his own. This scholarship is based not only on your academic standing, but also on the character you demonstrate. Character is best defined as doing the right thing or conducting yourself as a person who does the right thing even when no one is looking. To that end, the final requirement for this scholarship will be for you to send a handwritten card of thanks to the address below with the purpose of thanking the selection committee who has given you this scholarship. This committee is made up of people who volunteer their time to go through your application and determine your eligibility for this scholarship. They do this without pay or any notoriety. This is their way of paying forward. This thank you card MUST arrive at my home within two weeks of your notification of *scholarship.* I will then forward copies of your card to each member of the committee. If you do not meet this requirement, your scholarship will be cancelled without further notice. Please sign below that you have read and understand this requirement and return this page as part of your application.

I have read the above and understand this requirement for the Michael J. Perry Scholarship.

Name (Print) _____

Signature _____

Completed and Signed Applications With Supporting Documents **Must** be Postmarked **No Later Than April 1, 2024 to:**

Mr. George F. Santoro Chairman, Michael J. Perry Scholarship Committee 4962 Brenner Drive Hamburg, New York 14075