

Cuore d'Italia Inc.

Order Sons & Daughters of Italy in America
Lodge No. 2703 P.O. Box 7271 Jupiter, Florida 33468-7271
www.sonsofitalyjupiter.com
sonsofitalyjupiter2703@gmail.com

Scholarship awards are given to local high school students, of Italian Heritage, who qualify every year. The lodge has a special committee which is dedicated to scout for qualified students that may be recipients of the scholarships. They must meet the requirements for our scholarships and compose a 500-word essay stating their needs.

TO: Guidance Counselors of the Class of 2025
FROM: Sons & Daughters of Italy, Cuore d' Italia, Lodge 2703 of Jupiter, Florida
SUBJECT: **\$1,000 Scholarships to the Graduating Class of 2025**

REQUIREMENTS: **Applicants must provide these to be considered**

- 1) Be well rounded individuals;
- 2) High scholastic achievers with an outstanding grade point average;
- 3) Have outstanding work ethics;
- 4) Be involved with their community and their school;
- 5) Be of Italian descent;
- 6) Complete the entire application and provide Graduation pictures when chosen;
- 7) Write an essay, maximum 500 words, explaining why they deserve the scholarship and how they will benefit from the award.

Enclosed you will find five pages of application information (including this page).

Please contact Scholarship Committee member Sister Theadora Boffa at (561) 799-0917 or Sister Marion Bonsignore at (772) 545-2440 with any questions.

Applications must be completed, and mailed or emailed, by March 31, 2025 to:

Theadora Boffa
4715 Dovehill Drive
Palm Beach Gardens, FL 33418
sonsofitalyjupiter2703@gmail.com
Tel: (561) 799-0917

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PLEASE NOTE: This application contains 5 pages (A – K). Incomplete applications will not be returned.

(A) APPLICANT'S INFORMATION:

NAME: _____ SEX: _____
(LAST) (FIRST) (MIDDLE)

ADDRESS _____
(NUMBER & STREET)

(CITY) (STATE) (ZIP CODE)

HOME TELEPHONE #: _____ DATE OF BIRTH: _____
CELL TELEPHONE # _____

SSN#: _____ PLACE OF BIRTH: _____

(B) FAMILY INFORMATION:

FATHER'S NAME: _____ OCCUPATION _____

PLACE OF EMPLOYMENT: _____ ANNUAL INCOME: _____

MOTHER'S
MAIDEN NAME: _____ OCCUPATION: _____

PLACE OF EMPLOYMENT: _____ ANNUAL INCOME: _____

LIST NAME AND AGES OF BROTHERS AND SISTERS AND INDICATE IF ANY ARE CURRENTLY ATTENDING COLLEGE. PLEASE COMPLY WITH ALL DIRECTIONS AND BE EXPLICIT.

1. NAME: _____ AGE: _____ IN COLLEGE: _____
2. NAME: _____ AGE: _____ IN COLLEGE: _____
3. NAME: _____ AGE: _____ IN COLLEGE: _____
4. NAME: _____ AGE: _____ IN COLLEGE: _____

(C) SCHOOL INFORMATION:

NAME OF HIGH SCHOOL CURRENTLY ATTENDING: _____

DATE OF GRADUATION: _____

GPA YEAR BY YEAR: (MUST BE COMPLETED)

WEIGHTED: FR _____ SO _____ JR _____ SR _____

UNWEIGHTED: FR _____ SO _____ JR _____ SR _____

PSAT SCORES: VERBAL _____ MATH _____

SAT SCORES: VERBAL _____ MATH _____

ACT COMPOSITE SCORE: _____

LIST SCHOOL CLUBS, OFFICERS AND ACTIVITIES YOU'RE INVOLVED IN:

(D) PERSONAL COMMUNITY INTERESTS AND HOBBIES:

WHAT ARE YOUR INTERESTS, HOBBIES, PASTTIMES AND LEISURE ACTIVITIES?

(E) WORK EXPERIENCE:

LIST ANY WORK EXPERIENCE (S) AND INDICATE IF YOU ARE CURRENTLY EMPLOYED:

(F) LIST THE COLLEGES AND UNIVERSITIES TO WHICH YOU HAVE APPLIED FOR ADMISSION. STATE IF YOU HAVE BEEN ACCEPTED:

WHAT SUBJECTS DO YOU PLAN TO MAJOR AND MINOR IN?

MAJOR: _____ MINOR: _____

(G) LIST ANY OTHER FINANCIAL AID AND / OR SCHOLARSHIPS YOU HAVE ALREADY RECEIVED OR FOR WHICH YOU ARE APPLYING:

1. _____

2. _____

3. _____

4. _____

(H) RECIPIENTS OF THIS SCHOLARSHIP MUST BE OF ITALIAN DESCENT. DESCRIBE AND EXPLAIN HOW YOU QUALIFY:

(I) LIST ALL PRESENT OR PAST FAMILY MEMBERS WHO ARE OR HAVE BEEN MEMBERS OF THE SONS OF ITALY OF AMERICA, INCLUDE NUMBER OF LODGE (OPTIONAL, FOR INFORMATION ONLY).

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(J) SUBMIT AT TIME OF NOTIFICATION: 1 OR MORE GRADUATION PICTURES. MUST HAVE ONE IN CAP AND GOWN.**

(K) BY MY SIGNATURE BELOW, I CERTIFY THAT I AM OF ITALIAN DESCENT AND INTEND TO ENROLL AS A FULL TIME STUDENT IN AN ACCREDITED JUNIOR COLLEGE, COLLEGE OR UNIVERSITY IMMEDIATELY UPON GRADUATION FROM HIGH SCHOOL.

(Applicant's Signature)

(Date)

(Parent's Signature)

(Date)

Be sure to complete and return your application no later than March 31, 2025.

Please return to:

Theadora Boffa

4715 Dovehill Drive

Palm Beach Gardens, FL. 33418

sonsofitalyjupiter2703@gmail.com

Please contact Scholarship Committee member Sister Theadora Boff at (561) 799-0917 or Sister Marion Bonsignore at (772) 545-2440 with any additional questions.

IMPORTANT: Include in your response a 500-word maximum essay explaining why you are deserving of the scholarship and how you will benefit from the award and your college education.