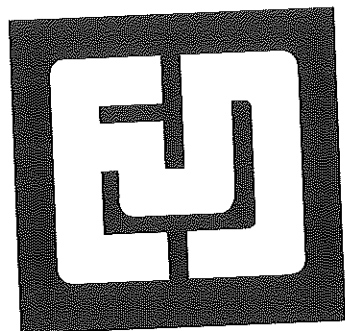


# Edward J. DeBartolo MEMORIAL SCHOLARSHIP FOUNDATION



Scholarship Application  
For the Graduating Class of 2023

Presented By

THE  
**DeBartolo**  
C O R P O R A T I O N



*Denise and John York*



# Application for Scholarship

*Please Print Legibly*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ GPA (current): \_\_\_\_\_

High School: \_\_\_\_\_

What County is your High School in? (circle one): Columbiana Mahoning Trumbull

## **High School Activities:**

Do you currently work? (If yes, tell us where, how long and how many hours):

\_\_\_\_\_  
\_\_\_\_\_

Do you do any volunteer work? (tell us about your work and how much time you spend per week):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please **list** your extra-curricular school activities:

- |          |          |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

Tell us why these activities are important to you:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tell us about a special teacher in your life and how she/he influenced your future:  
(You may attach a separate essay on this subject if you choose)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# College Plans

List below the schools to which you have applied and indicate if you have been accepted:

1. \_\_\_\_\_ Accepted \_\_\_\_\_ Pending \_\_\_\_\_ Projected Cost\* \_\_\_\_\_
2. \_\_\_\_\_ Accepted \_\_\_\_\_ Pending \_\_\_\_\_ Projected Cost\* \_\_\_\_\_
3. \_\_\_\_\_ Accepted \_\_\_\_\_ Pending \_\_\_\_\_ Projected Cost\* \_\_\_\_\_

\*cost of tuition, books, room and board **per year**

Projected Major (first choice): \_\_\_\_\_

Tell us why you are choosing this field of study: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Projected Major (second choice): \_\_\_\_\_

Minor areas of study: \_\_\_\_\_

List other scholarships applied for including notification date, value of the scholarship and if you've been awarded the scholarship.

Name of Scholarship	Amount of Award	Notification Date	Award Accepted Yes/No (circle)
1. _____	_____	_____	Yes/No (circle)
2. _____	_____	_____	Yes/No (circle)
3. _____	_____	_____	Yes/No (circle)
4. _____	_____	_____	Yes/No (circle)

Total Amount of Awards Accepted \_\_\_\_\_

☐ **Personal Essay** – On a separate sheet of paper, please tell us why you deserve to receive this grant. At this time, you should outline any special needs. Be very clear and keep your response between 150 and 200 words.

☐ **Attach your essay, high school transcripts, FAFSA information, with the EFC and copies of page 1 of your parents'/guardians' tax returns or ANY household income from the past two years to this application.**

# Applicant's Financial Information

Father/Guardian Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Present Employer \_\_\_\_\_

Mother/Guardian Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Present Employer \_\_\_\_\_

**(YOU MUST ATTACH PAGE 1 OF YOUR PARENTS/GUARDIANS FEDERAL INCOME TAX RETURN FOR THE PAST TWO YEARS OR PROOF OF ANY INCOME OR BENEFITS. THIS APPLICATION WILL NOT BE CONSIDERED WITHOUT THIS INFORMATION)**

Please list **other** family members living at home:

Name	Age	College (if attending)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

**FOR THE PRINCIPAL, VICE-PRINCIPAL OR GUIDANCE COUNSELOR: Please complete the rest of this form upon the student's completion of the previous requirements.**

Please list any special recognition and/or awards the applicant has received as a student:

\_\_\_\_\_

\_\_\_\_\_

This student ranks \_\_\_\_\_ in a graduating class of \_\_\_\_\_ students. (If your school does not rank, is this student valedictorian or salutatorian of his/her class?)

**On school letterhead, please tell us why you feel this student deserves to be considered for a scholarship award. Your comments are very important to the selection process.**

Signature: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

*Completed application with essay, transcripts, FAFSA information and tax return/income verification copies must be received no later than April 7, 2023. Please forward to:*

**Edward J. DeBartolo Memorial Scholarship Foundation  
7620 Market Street; Youngstown, Ohio 44512**

*Scholarships will be awarded based on academic achievement, financial need, and community involvement.*