



ROBERT "BOBBY" GUY POLLINO II
MEMORIAL SCHOLARSHIP FUND
APPLICATION
(FOOTBALL)

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Deadline – November 1st. NO LATE APPLICATIONS ACCEPTED

Criteria: Jamestown High School senior who is a member of the Varsity Football Team.

Requirements

for eligibility:

1. Complete the applicable fields in the following application (Print or Type).
2. Return application to the **Chautauqua Region Community Foundation, 418 Spring Street, Jamestown, NY 14701 (716) 661-3390.**

Name _____ Male/Female _____

Address _____

Date of Birth _____ Last 4 SSN # _____ Phone # _____

Parents/Guardians _____ Phone # _____

Address _____

List all extracurricular activities, volunteer work and awards that you were involved in or received during your years at JHS:

List college information below:

Major _____	GPA on last report card _____
Next year, I plan to attend _____	
Address _____	

List financial information below:

Parent/Guardian Contribution \$ _____	Student Contribution \$ _____
Scholarship and Awards \$ _____	Total \$ _____

I hereby affirm, under penalty of loss of any award I may win, that the information provided is correct and promise to notify the Chautauqua Region Community Foundation immediately of any change.

Signature _____ Date _____