



**APPLICATION INSTRUCTIONS FOR  
The Ralph/Ethel Infante and Daniel J. Holiga  
Mercer County Scholarship Fund  
Shenango Valley Foundation**

**Purpose**

This charitable fund will provide a \$500.00 scholarship to a graduating high school senior attending a school within Mercer County who plans to attend a college or university.

The Infante/Holiga Scholarship Committee will give consideration to the following criteria:

- Financial Need
- Grade point average
- School activities
- Noteworthy achievements
- Work history
- Community and personal activities

If you are applying for this scholarship, you should request that your guidance counselor submit your high school records indicating the above information. If employed, please provide a letter of reference from your employer describing your present job, performance, attitude, attendance, etc. Attach in writing any community groups or activities that you are involved in.

Please write an essay on the topic of your career goals, life mission and why you feel that you should be a recipient of this scholarship.

The scholarship recipient will be selected by the donor's representative. (No scholarships will be given to applicants who are direct relatives of the donors or, to trustees, officers or employees of the Community Foundation of Western PA and Eastern OH.)

**Eligibility**

Any graduating senior attending a Mercer County area high school that plans to attend a college or university.

**Terms of Scholarship**

This scholarship for one year only and selection shall be made by donor's representative without regard to race religion or gender of the applicant, their political or economic views. No restriction will be placed upon candidate's choice of college or university.

Proof that the scholarship recipient is actually enrolled as a student at the educational institution for which the grant is made will be required prior to disbursement of scholarship funds, which are paid directly to the educational institution and never directly

to the recipient. This grant covers tuition, fees and books for the applicable Fall, Winter or Spring quarter.

*A luncheon honoring the recipients is scheduled for mid-June. Should you be chosen as the recipient of this scholarship your attendance at this luncheon is strongly encouraged, as the donors who make the scholarship possible also will be invited.*

**Application**

Each applicant will complete a “Request for Scholarship” application form available from the high school guidance office or [www.sv-foundation.org](http://www.sv-foundation.org).

Make and keep copies for your records of all forms that you send to us. **Please do not staple pages. You may use paper clips or binder clips if necessary.**

1. The application must be filed by March 7 of the current year.
2. Return Scholarship Application to:  
Shenango Valley Foundation  
c/o Infante/Holiga Scholarship  
33 Chestnut Street  
Sharon, PA 16146
3. The recipient will be notified of approval at the awards ceremony held at his or her school.

Please do not submit the instruction pages with your application. You should remove and retain these instructions for your personal records.

**The Ralph/Ethel Infante and Daniel J. Holiga  
Mercer County Scholarship Fund**

**REQUEST FOR SCHOLARSHIP  
APPLICATION FORM**

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Social Security Number \_\_\_\_\_

*(required)*

Birth Date \_\_\_\_\_ Gender M F EMAIL address \_\_\_\_\_

High School \_\_\_\_\_ Date Graduated \_\_\_\_\_

**Educational Plans:**

List in order of personal preference those colleges to which you will apply and indicate tuition, fees, and room and board for each. If you have already enrolled at a certain college, indicate the name of the school and appropriate costs for this tuition.

College/University	Tuition	Room & Board	Books	Total
1.				
2.				
3.				
4.				

Do you plan to commute or reside on campus? \_\_\_\_\_

Major or field(s) of interest \_\_\_\_\_

Proposed profession \_\_\_\_\_

List other scholarships or financial assistance for which you are applying: \_\_\_\_\_

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

**Parents or Guardians:**

Father (Guardian) \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Employed by \_\_\_\_\_ How Long? \_\_\_\_\_

Mother (Guardian) \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Employed by \_\_\_\_\_ How Long? \_\_\_\_\_

Marital Status of parents: ( ) Married ( ) Separated ( ) Divorced ( ) Widowed ( ) Single

Number of Siblings \_\_\_\_\_ Siblings in College \_\_\_\_\_

**Income:** for the "Parent" amount, use the following information from their tax return:

Parent(s) \$ \_\_\_\_\_

Scholarships \$ \_\_\_\_\_

Student Income \$ \_\_\_\_\_

**Other:**

Are you receiving any other financial assistance for your education? \_\_\_\_\_

If yes, How? \_\_\_\_\_

**Student Employment Record:**

Employed at \_\_\_\_\_

Date of Hire \_\_\_\_\_

Department \_\_\_\_\_ Position \_\_\_\_\_

**Certification:**

I hereby certify that financial assistance is necessary if I am to attend the college of my choice during the \_\_\_\_\_ academic year as indicated.

In signing this application, I certify that the information given is complete and correct to the best of my knowledge and belief.

In connection with this application for a scholarship from the **The Ralph/Ethel Infante and Daniel J. Holiga Mercer County Scholarship Fund**, I hereby authorize the administrator serving this program to request from any school attended by me: information, transcripts, financial aid records and any other records deemed necessary for the administration of this scholarship program, and I authorize any such school to submit any information, transcripts and other records that may be requested by the scholarship administrator.

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Applicant Signature

Parent Signature

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Date

Date