**BUFFALO RETIRED ADMINISTRATORS ASSOCIATION**

JACQUELINE L. MORANA SCHOLARSHIP

**SUBMIT ALL INFORMATION: DEADLINE (POSTMARKED) APRIL 15, 2021**

Date of Application \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_

Last First MI

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City \_\_\_\_\_\_\_\_\_\_\_State \_\_\_\_\_ ZIP \_\_\_\_

Telephone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Graduation: \_\_\_\_\_\_\_\_\_

College/University you plan to attend (name and address):

Planned Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you applied for admission: \_\_\_\_ Yes \_\_\_\_ No Date of acceptance\_\_\_\_\_\_\_\_\_\_

(Send copy of acceptance letter/s)

Please list honors received in High School (Scholastic and / or others):

High school extra-curricular activities/class offices:

Involvement in community service projects: (must complete)

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