



**SONS AND DAUGHTERS OF ITALY**  
**Watsonville Lodge #2016**  
**Class of 2023 Scholarship Application**

**CRITERIA FOR SCHOLARSHIP:**

- 1. Applicant must be related to a current member in good standing of *Sons and Daughters of Italy Watsonville Lodge #2016***
- 2. Applicant must attend school and reside in either Santa Cruz County, Monterey County or San Benito County**
- 3. Applicant must have a 3.0 or better Grade Point Average**

**FINAL APPLICATION DATE: APRIL 7, 2023**

**ANSWER ALL QUESTIONS:** No application will be considered unless all questions are answered.  
(Printing or typing recommended)

**PROVIDE:**

- A certified transcript with grade point average;
- Letters of Recommendation (minimum 2) from teachers, administrators, or members of the community
- **A detailed 300 words essay on your Italian origin and heritage. If you are not Italian, please submit an essay on your family's heritage.**

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

Birth Date: \_\_\_\_\_ Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

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

Name of Father or Guardian: \_\_\_\_\_

Name of Mother or Guardian: \_\_\_\_\_

Name(s) of Sibling(s) : \_\_\_\_\_

Name(s) of relative(s) who is a current member in good standing of Sons and Daughters of Italy Watsonville Lodge #2016:

Name(s): \_\_\_\_\_

What College or University do you plan to attend? \_\_\_\_\_

What course of studies (your selected major) will you pursue following high school graduation?

What field do you plan to enter following college? Please elaborate:

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Do you have a job? Yes \_\_\_\_\_ No \_\_\_ If yes, where are you employed and how many hours per month?

Place of Employment: \_\_\_\_\_ Hours per month \_\_\_\_\_

Are you involved in community activities? Yes \_\_\_ No \_\_\_ If yes, please list these activities:

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What school activities have you been in, or are presently involved in?

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Have you currently, or in your past high school years, held a class or school office? Yes \_\_\_ No \_\_\_

If yes please list: \_\_\_\_\_

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List the sports activities in which you are involved or have been during your high school years:

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Do you or your family have special circumstances that you feel we should be aware of? This includes your particular financial need. Please explain, if you like. (Any information is strictly confidential)

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**In support of this application I submit the foregoing information and certify it to be true and correct. I understand that if any information submitted is determined to be untrue or incorrect, the Committee may reject the application.**

**I understand and agree that if I am awarded a scholarship by Sons and Daughters of Italy Watsonville Lodge #2016, it will be payable only upon proof of completion of the first quarter/semester of the 2023 academic year from a recognized community college or accredited college or university, public or private, no later than February 29, 2024.**

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant's Parent or Guardian

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**Please comply with all the above so that your application can be processed, and mail the application and all supporting documents to:**

**Michelle Cecchini  
Scholarship Chair  
Sons and Daughters of Italy  
Watsonville Lodge #2016  
606 Townsend Drive  
Aptos, CA 95003**