

# CARLE PLACE MS/HS PTSA SCHOLARSHIP APPLICATION

The Carle Place MS/HS PSA will grant **TWO** seniors scholarships, each in the amount of \$1,000.00

The two seniors chosen to receive this scholarship must demonstrate a continuing commitment to improving his/her community. The candidates must also demonstrate outstanding effort to attain a personal best in academic endeavors. Each candidate must meet the following requirements:

- Cumulative GPA of 80 or better
- Current membership in the PTSA
- At least 10 hours of community service in the last calendar year. This community service can be incorporated or earned through one of the clubs you belong to at school such as SPARC or Key Club or any other club wherein the event or activity favored the community or a member of a community in need.

In addition, the candidate must also submit:

- The completed application
- A well-constructed essay of 300-500 words describing future college or vocational goals and incorporate how you feel Carle Place Schools prepared you for those endeavors.

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Names of organizations where community service was performed (attach additional sheet if necessary)

Supervisor

Organization & Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Completed applications are due in the HS guidance office by 2/12/20 of senior year.**

Carle Place MS/HS PTSA Scholarship  
Carle Place MS/HS  
168 Cherry Lane  
Carle Place, NY 11514

## COMMUNITY SERVICE REFERENCE FORM

This form is to be given to and completed by the person who has supervised your community service work.

Date \_\_\_\_\_

Dear \_\_\_\_\_,

\_\_\_\_\_, who is a senior at Carle Place High School, has applied for the Carle Place MS/HS PTSA Scholarship. One of the main requirements of this scholarship is service to the community. This student has worked for your organization, and we are requesting that you complete this questionnaire in order to help us with our decision. **Please return this form to the Carle Place High School Guidance Department, at the above address, by 2/12/20.** Thank you for your assistance.

Sincerely,  
Carle Place MS/HS PTSA

Briefly describe your relationship to the applicant and the applicant's responsibilities:

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How would you rate the quality of the applicant's work? \_\_\_\_\_

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Dates of Service \_\_\_\_\_ Hours per week \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_