

# DONNA L. MANKO-LUSARDI SCHOLARSHIP

NURSING, RESPIRATORY THERAPY, X-RAY TECHNICIAN

2018-2019

## Scholarship Application Form

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

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

Phone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Parent's Name/Address: \_\_\_\_\_

Name of High School: \_\_\_\_\_

Sophomore GPA: \_\_\_\_\_

Junior GPA: \_\_\_\_\_

Senior GPA: \_\_\_\_\_

Were you a participant in any High School extra-curricular activities? If so, please provide details:

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If additional space is needed, please attach a separate sheet.

**During High School, were you employed? If so, please provide details.**

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**Name of Educational Institution you will be attending:**

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Name of Program: \_\_\_\_\_

Length of Program: \_\_\_\_\_

Date of Acceptance into Program: \_\_\_\_\_

**Have you been awarded any other scholarship(s)?** \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, please provide details:

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**Family Information and Income:**

Please check which category your family income falls into:

\_\_\_\_ \$0-\$20,000

\_\_\_\_ \$20,001-\$35,000

\_\_\_\_ \$35,001-\$50,000

\_\_\_\_ \$50,001-\$65,000

\_\_\_\_ Over \$65,000

Number of members currently in your household: \_\_\_\_\_

Please list the members of your household:

NAME

AGE

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**References:** On a separate sheet of paper, please provide three (3) character references. Please include their name, address, occupation, and phone number.

**Essay:** Prepare a double-spaced typewritten essay of approximately seventy-five (75) words on the following topic: "How I Was Influenced to Pursue This Career." Ensure that the following questions are answered in the essay:

- (1) How did you become interested in this career?
- (2) What most interests you about this career?
- (3) What are your long-term goals in this career?

**High School Transcript:** Attach a certified copy to this application.



**Eligibility**

\*Graduating senior from Kingsford, Iron Mountain, Norway, Niagara, North Dickinson, or Florence High School.

\*Pursuing a career in Nursing, Respiratory Therapy or X-Ray Technician.

**Scholarship**

\*\$500.00 to entry level student

\*\$500.00 to continuing level student

\*Scholarship will be paid directly to the Educational Institution. The continuing level student must have a minimum GPA of 2.0 or better to apply.

**DEADLINE FOR APPLICATION: APRIL 2<sup>nd</sup>, 2018**

**SUBMIT COMPLETED APPLICATION TO:**

Donna L. Manko-Lusardi Scholarship  
C/O Leroy Lusardi  
815 Fairbanks Street  
Iron Mountain, MI 49801



**Authorization to Release Information:**

- (1) In submitting this application, I hereby authorize my high school advisor to make available to the Scholarship Committee information regarding my academic records.
  
- (2) I hereby certify that all statements contained herein are true and factual.

**Dated:** \_\_\_\_\_, 2018      \_\_\_\_\_  
**Applicant's Signature**