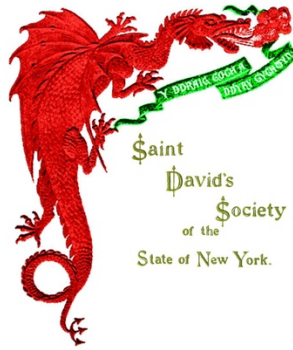


Scholarship Application – St. David’s Society of the State of New York



STEP 1 - Please complete the fields below:

This is for the Society to follow up.

Full Name: _____

Address: _____

Contact: email address: _____ phone: _____

Current Status Details: (Student/working/traveling/other): _____

Planned Academic Program: _____

Institution & Address: _____

Financial Resources Available:

Family: _____ Savings: _____ Scholarships: _____

STEP 2 – Additional Information Requirements

- a) Attach Copy of Academic Record (Transcripts)
- b) Attach two (2) Letters of Recommendation

STEP 3 – Print the completed form and mail it, along with Additional Information to the following address:

St. David’s Society of the State of New York
47 Fifth Avenue, New York, NY 10003