HURLEYVILLE FIRE DEPARTMENT COMPANY No. 1 Community Scholarship Application

The Hurleyville Fire Company No. 1 will be awarding a Scholarship(s) to graduating high school students that wish to pursue their educational goals.

The applicant must be a permanent resident of the Hurleyville Fire District.

The scholarship will be awarded after completion of the first semester of College and the registration for the second semester of the academic year for which the Scholarship was awarded.

Second award will be awarded after completion of second semester with proof of grades and course completion.

Awards or award will be recommended based upon good citizenship, moral character, academic achievement, community service, school involvement.

The monetary award will be determined by the number of applicants and will be at least \$250.00.

Should no candidate meet the requirements, no award will be made for the academic year.

Applicants' signature
(To show above statement was read and understood)

All complete applications (both pages) must be submitted in person or (post marked) to the Scholarship Committee by April 1st, 2024.

Notification of the award(s) will be made prior to graduation.

On behalf of the Scholarship Committee and the Hurleyville Fire Company No.1 thank you for applying and continuing your education.

Send to:

Hurleyville Fire Company No.1 Scholarship Committee Chairperson P.O. Box 357, Hurleyville, New York 12747

- or, C/O Miranda Behan, Scholarship Committee Chairperson P.O. Box 185 Hurleyville New York 12747
- or, C/O Tony Harvey, Scholarship Committee 291 Main Street Hurleyville, New York 12747

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Please print or type the fol	lowing information:
Applicant:	
Parent / Guardian:	
Address – Mailing:	
Address - Physical:	
Phone Numbers: (Home) _	(Cell)
High School Attending:	
Graduation Date:	**************************************
considered Write an essay (ar o Candidates o Why he/she	g documents: script commendation on why the candidate should be ound 100 words). The assay should include
I certify that all information of my knowledge.	in this application is true and accurate to the best
Signature of Candidate:	
Parents or Guardians Initial	s or signature:
	Date received by F.D//(Page 1 of 2)