



# The Rev. George T. Ruffolo, C.M.F. Memorial Scholarship Foundation

*A Non-For-Profit Foundation*

## OFFICIAL APPLICATION

*All items must be completed. Please print in ink or type.*

Return complete applications to:

**Rev. George T. Ruffolo, C.M.F.**  
**Memorial Scholarship Foundation**  
7557 W. 63<sup>rd</sup> Street  
Summit, Illinois 60501

**Find us on Facebook at;**  
**Rev. George Ruffolo Memorial**  
**Scholarship Foundation or at**  
**[www.revgruffoloscholarships.com](http://www.revgruffoloscholarships.com)**

### Complete This Application If You Are:

- Any enrolled Senior in High School *who has been **ACCEPTED*** to an accredited College/University in the United States of America
- OR ---
- Any enrolled undergraduate student at an accredited United States University, College, Community college or City of Chicago College.

### Academic Scholarships Eligibility

*Any enrolled senior student who has been **ACCEPTED** to a 4 year accredited University/College, or a currently enrolled College student who has completed a minimum of 12 credit hours. Any applicant who honestly provides all requested information, complies with all request in submitting the application and signs the application will be considered for this scholarship.*

### The award criteria are as follows:

1. Accumulative GPA of 3.0 on a 4.0 scale or “B” average or higher
2. Applicants **must** include the following supporting documentation. *Failure to include the requested information will result in the automatic exclusion from consideration;*
  - A. The most recent report card and academic transcript;
  - B. Acceptance letter from a college/university;
  - C. Letter(s) of recommendation, preferably academic advisor, counselor or pastor (**must be from a non-family member**)
3. Please submit a **one** page **typed** essay advising the Scholarship Foundation about themselves and why he/she deserves to be a recipient of The Rev. George T. Ruffolo C.M.F. Scholarship.

4. All applicants must submit and furnish proof of enrollment (payment voucher, receipt or paid invoice) and/or a commitment letter *at least SEVEN days after being notified by the Foundation of having been selected as a scholarship recipient. Failure to comply will result in a forfeiture of any scholarship award.*

5. All applicants have an *ongoing duty* to notify the Foundation of *any* change in circumstances, including, but not limited to, any decision to forgo attending any school, college or university named in the scholarship application; any leave of absence; any change in residence or address; any decision to attend any academic institution other than the school named on this application; any decision not to attend the university, college or school identified in the scholarship application; the revocation of any acceptance to *any* school, college or university named in the scholarship application and any other material change in circumstances. *Applicants fully understand that failure to notify the Foundation of any change cited herein will result in the revocation of any scholarship award and that the Foundation is free to employ all legal channels available to recover any scholarship award should the applicant fail to disclose any material change in the application.*

6. *Any incomplete application will result in being disqualified from consideration. Failure to submit all required documents with the application will also result in an automatic disqualification and the applicant will not receive any consideration.*

7. **RELEASE;** All applicants authorize the Rev. George T. Ruffolo Memorial Scholarship Foundation (“the Foundation”) permission to use and retain the rights of their images, likeness, biographies, and any and all audio or video recordings of the scholarship applicants without payment or *any* other type of consideration. Applicants further understand that their image may be used for publicity purposes and that any image or recording of any type may be edited, copied, exhibited, published or distributed. Applicants further waive the right to inspect or approve the finished or edited product wherein the likeness of the applicants appears. By accepting a scholarship from the Foundation, all winners comprehend that they consent that photographic or video recordings of themselves may be electronically displayed via the internet, the Foundation’s web site, the Foundation’s facebook page or in any other public setting. Winners further comprehend that they may or not be consulted about the use of their photographs or video recording for any other purpose other than listed above.

**Signature;** \_\_\_\_\_ **Date** \_\_\_\_\_

8. All scholarship recipients *must* attend the Foundation’s Scholarship Banquet to receive their scholarship award. Failure to attend the Scholarship Banquet, *without the consent of the Foundation*, may result in a forfeiture of any scholarship previously designated to an applicant.

**Recipients of The Rev. George T. Ruffolo C.M.F. Memorial Scholarship  
will be notified via telephone, U.S. mail and/or email.**

**IMPORTANT SCHOLARSHIP DEADLINE**

**The application deadline for The Rev. George T. Ruffolo, C.M.F.  
Memorial Scholarship must be submitted no later than May 31, 2017**

**All Applications submitted via U.S. Mail must be post marked May 31,  
2017**

**NO EXCEPTIONS!**

**STUDENT INFORMATION**

Last Name _____	First Name _____	Middle Initial _____
Email Address _____	Telephone # _____	
Street Address _____	Apartment _____	
City _____	State _____	Zip _____
Parish _____		

Current Age _____		
State of Birth _____	City of Birth _____	
Country of Birth _____		

***Social Security number and Date of Birth to be furnished upon request***

Current High School, University or College Enrolled at \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Year (circle one): Freshman Sophomore Junior Senior; Date of Graduation \_\_\_\_\_

Grade Point Average (GPA): \_\_\_\_\_ (On a 4.0 scale) Class Rank \_\_\_\_\_  
*\*Attach proof of GPA. Your most recent official transcript is required.*

ACT Score \_\_\_\_\_ PSAT Score \_\_\_\_\_ Parish \_\_\_\_\_

Name of Counselor \_\_\_\_\_ Telephone # \_\_\_\_\_

I have being accepted to \_\_\_\_\_ Intended Major \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Have you ever being convicted of a felony or a crime of dishonesty? Yes  No

\*If Yes, explain on a separate sheet of paper.

## PARENT(S) INFORMATION

### FATHER

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Email Address \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Mobile Telephone # \_\_\_\_\_

Street Address \_\_\_\_\_ Apartment \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Place of birth; \_\_\_\_\_

**MOTHER**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Email Address \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Mobile Telephone # \_\_\_\_\_

Street Address \_\_\_\_\_ Apartment \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Place of birth; \_\_\_\_\_

How did you hear about our Scholarship ? \_\_\_\_\_

\_\_\_\_\_

**STATEMENT OF ACCURACY**

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote **Rev. George T. Ruffolo, C.M.F. Memorial Scholarship Foundation** program. I further understand that *any* misrepresentation, falsehood, lie or attempt to deceive or mislead will cause the Scholarship Foundation to remove your application from consideration.

Signature of Scholarship Applicant: \_\_\_\_\_ Date; \_\_\_\_\_, 2017

**OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE**

**Rev. George T. Ruffolo, C.M.F. Memorial Scholarship Foundation**

Scholarship Review Committee

Date Application Received: \_\_\_\_\_ Mail  In Person

Conflict Check:

Supporting Documentation Check List

- Completed Application
- Proof of School Enrollment (City Colleges: current City of Chicago Class Schedule);  
College or University Acceptance Letter
- Report Card / Official Academic Transcript
- Personal Reference Letter
- Completed Essay
- Proof of payment (voucher or receipt) and/or commitment letter

Approved by: \_\_\_\_\_

Officer or Board Member Name (Please Print)