

**BETTY KEIL & ELSA GREENWALD MEMORIAL SCHOLARSHIP AWARD**

*sponsored by the Mamakating First Aid Squad  
(**must** live in the Town of Mamakating)*

Name \_\_\_\_\_

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

Telephone \_\_\_\_\_ Date of Birth \_\_\_\_\_

High School Presently Attending: \_\_\_\_\_

Class Standing \_\_\_\_\_ In a Class of \_\_\_\_\_ Present Average \_\_\_\_\_

List of school activities and Honors \_\_\_\_\_

\_\_\_\_\_

List Community (non-school) Activities & Honors: \_\_\_\_\_

\_\_\_\_\_

Plan to attend \_\_\_\_\_

Career Possibilities after College \_\_\_\_\_

Occupation of Father \_\_\_\_\_ Mother \_\_\_\_\_

List names & ages of brothers and sisters \_\_\_\_\_

Please explain any unusual family circumstances the committee should know about, such as, illness, housing problems, family situations, recent business reverses which might affect your ability to pay for your education \_\_\_\_\_

\_\_\_\_\_

Have you been awarded any other scholarships? If so, please list name & value

\_\_\_\_\_

Please put any additional information you feel might be pertinent in helping the committee make a decision on the reverse side of this application.