



Gift of Sight

New York State Grand Lodge Foundation, Inc.

Order Sons of Italy in America

www.nysosia.org

Gift of Sight 2018 Grant Application
Robert Ferrito, Foundation President **Michele Ment, Scholarship Chairperson**
Mary Naccarato, Gift of Sight Chairperson

Name: Last _____ First _____ Middle _____

Home Address: _____ City _____ State _____ Zip _____

Phone# () _____ Date of Birth: Mo ___ Day ___ Year ___ Sex: Male Female

College/Curriculum to which you are applying _____ Date entering _____

Name/Address of High School _____ Graduation Date _____

Family Members of OSIA Lodges Should Complete The Lodge Identification Section Below!
This is not required for other Applicants.

Lodge Name & Number _____ mailing address _____
 hereby supports the scholarship application of the above student.

Member _____ Relationship To Student _____

President of Lodge _____ Signature of President _____

Address _____ Phone # _____

APPLICANTS MUST COMPLETE ALL INFORMATION ON THIS FORM.

1. Undergraduate awards are for current high school seniors who will begin full time undergraduate study in the fall 2018 semester. If a student is chosen as a recipient, awards will be made payable to him or her and the institution.
2. The following **MUST** be submitted directly to the District Scholarship Chairperson: (A) Official transcripts including first semester senior year grades and SAT/ACT scores. (B) Official documentation of special need: Legally/Blind or visually impaired. (C) Two letters of recommendation from teachers or counselors. (D) A student essay summarizing educational and career goals, school and community service and a discussion of the significance of your Italian heritage.
3. Applicant must be a resident of New York State and of Italian heritage.
4. A \$10.00 application fee, made payable to the New York State Grand Lodge Foundation, Inc. must be included with application.
5. All Application fees and supporting materials must be sent to Michele Ment, New York State District Scholarship Chairperson. **NO LATER THAN MARCH 31, 2018.**

Signature of Applicant _____ Date _____

PLEASE RETURN COMPLETED APPLICATION TO DISTRICT SCHOLARSHIP CHAIRPERSON:
Michele Ment, Scholarship Chairperson: 1027 Farmers Mill Road, Carmel, New York 10512



Gift of Sight
New York State Grand Lodge Foundation, Inc.
Order Sons of Italy in America
www.nysosia.org

New York State OSIA Grand Lodge Foundation, Inc.

Robert Ferrito, Foundation President. Michele Ment, Scholarship Chairperson.

Mary Naccarato, Gift of Sight Chairperson.

Once a year, the Gift of Sight presents a special scholarship grant to a high school graduating student, who is legally blind or visually impaired. The award criteria are that the applicant must be a current high school senior of Italian descent who will begin full time undergraduate study in the fall.

As per the enclosed application: an official document of special need (for blindness or visual impairment, must be submitted by doctor or social services director), official transcript of SAT/ACT scores, two letters of recommendation from teachers or counselors, and a student essay summarizing educational and career goals, school and community service and a discussion of the significance of Italian Heritage must be submitted for consideration.

Applicants must be a resident of New York State and of Italian Heritage.

A \$10.00 application fee must be included with each application.

Send application to: Michele Ment, NYS Scholarship Chair,

1027 Farmers Mills Road, Carmel, N.Y. 10512

"Gift of Sight" Scholarship Chair: Juliette Milazzo (516) 485-7011

**For information and Tax Deductible Donations, please contact: N.Y.S Order Sons of Italy in America Grand Lodge Foundation, 2101 Bellmore Avenue, Bellmore, N.Y or visit our website:
www.nysosia.org**