



Due in Counseling Center by March 16<sup>th</sup>

**The Mayor E. Donald Conroy Scholarship**

**P.O. Box 773  
Babylon, N.Y. 11702-0773**

**APPLICATION**

**ID NUMBER** \_\_\_\_\_

The Mayor E. Donald Conroy Scholarship is an award to a high school senior, who attends Babylon High School, or is a resident of Babylon Village who attends a private or other public high school, and plans to enroll in a full-time undergraduate course of study at an accredited two-year or four-year college or university, business school, school of nursing or technical school.

The scholarship award is in the amount of \$10,000, payable after presentation of evidence of registration.

The scholarship shall be awarded by the Mayor E. Donald Conroy Scholarship Committee based on its review of an outstanding applicant who has made a contribution to Babylon Village through community service.

\_\_\_\_\_  
Type or print all information in black ink.

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

**AGREEMENT**

All information on this form is true and complete to the best of my (our) knowledge. If asked by the committee, I (we) agree to give proof of the information that I (we) have given on this form. I (we) also realize that if I (we) do not give proof if asked, the student will not be considered for the scholarship.

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

Applicant Name \_\_\_\_\_

*Note: The Scholarship Committee does **NOT** receive the cover page of the application. The applicant's identity is never revealed. Only the name of the winner will be announced after the selection is made. All information will remain strictly confidential.*

*When the application is received, an ID number will be assigned to it. The name will be removed from all pages before the Scholarship Committee is given the application.*

### **Instructions**

**Type or print in black ink.**

- 1. Select a Sponsor. The sponsor is an adult (not a relative) who has supervised or worked with you on a community service project. Ask your sponsor to write a statement (Page 9) in support of your application.**
- 2. Give your sponsor The Sponsor Statement Page from this application (Page 9) and an envelope stamped and addressed to your guidance counselor at your high school. Request your sponsor submit the statement by the fifteenth of March.**
- 3. Complete your Applicant Statement.**
- 4. Complete all parts of the Application.**
- 5. Reread the Cover Page and sign the Agreement.**
- 6. Have your parent/guardian read the Cover Page and sign the Agreement.**
- 7. Give your Application, including your completed Applicant Statement to your Guidance Counselor for completion.**
- 8. Guidance Counselor must mail the completed Application, including the Sponsor Statement received, to the Mayor E. Donald Conroy Scholarship Committee by April 1<sup>st</sup>.**

**The Mayor E. Donald Conroy Scholarship  
Scholarship Application  
P.O. Box 773  
Babylon, N.Y. 11702-0773**

*Due in  
Counseling  
Center  
by  
March 16<sup>th</sup>*

**APPLICANT STATEMENT**

**As Mayor of the Village of Babylon what would you do to:**

- Improve the quality of life in the Village of Babylon
- Enhance the aesthetics of Babylon Village
- What programs or possible projects would you create to encourage community spirit and participation?





**SCHOOL ACTIVITIES**

List all school activities in which you have participated. Indicate any elected office. List in order of importance. Include the name(s) of your supervisor/coach.

<b>Grade 9</b>

<b>Grade 10</b>

<b>Grade 11</b>

<b>Grade 12</b>

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**Mayor E. Donald Conroy Scholarship**

**ID Number** \_\_\_\_\_

List any after school and summer employment.

Indicate places, dates and amounts of time spent each week, month, or season.

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List the schools to which you have applied. Indicate if you have already received acceptance.

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**Mayor E. Donald Conroy Scholarship**

**ID Number** \_\_\_\_\_

**SCHOOL STATEMENT**

**NAME OF SCHOOL** \_\_\_\_\_

The applicant ranks \_\_\_\_\_ in a class of \_\_\_\_\_ students.

Un-weighted average \_\_\_\_\_ Weighted average \_\_\_\_\_

SAT: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Written \_\_\_\_\_

**Total Community Service Hours:** \_\_\_\_\_

**GUIDANCE COUNSELOR RECOMMENDATION/STATEMENT:**

**Official School Seal:**

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**Guidance Counselor Signature/Date**



**SPONSOR STATEMENT**

The student is applying for the Mayor E. Donald Conroy Scholarship. The scholarship committee requests your statement to come from your experience in working with or supervising the student during time as a community service volunteer.

- 1. Describe how the student accomplished his/her achievement on public service.**
- 2. How did the student demonstrate initiative and self-motivation?**

**How long have you known the applicant?** \_\_\_\_\_

**In what capacity?** \_\_\_\_\_

**Signature of Sponsor:** \_\_\_\_\_

**Print Sponsor Name:** \_\_\_\_\_

**Please return this statement to the applicant's guidance counselor by March 15<sup>th</sup>.**