



# Gulf Coast Italian Cultural Society, Inc. Scholarship Committee

c/o Sandra Russell , Ed.D. Chair Phone: 267-879-2572  
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## APPLICATION FOR UP TO \$2,000 GCICS SCHOLARSHIP (PLEASE TYPE OR PRINT) Applicant's Personals

**NAME** \_\_\_\_\_ **SEX** \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

**ADDRESS** \_\_\_\_\_  
(NUMBER & STREET)

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**TELEPHONE #** \_\_\_\_\_ **E-MAIL ADDRESS** \_\_\_\_\_

**DATE of BIRTH** \_\_\_\_\_ **PLACE of BIRTH** (Town/City/State) \_\_\_\_\_

### (A) Family Data

**FATHER'S NAME** \_\_\_\_\_ **OCCUPATION** \_\_\_\_\_

**PLACE of EMPLOYMENT** \_\_\_\_\_

**MOTHER'S MAIDEN NAME** \_\_\_\_\_ **OCCUPATION** \_\_\_\_\_

**PLACE of EMPLOYMENT** \_\_\_\_\_

*If parents' address differs from yours enter theirs here* \_\_\_\_\_

Enter below the requested information as appropriate for each of your siblings

**1. Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **College** \_\_\_\_\_

**2. Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **College** \_\_\_\_\_

**3. Other** \_\_\_\_\_

**PLEASE NOTE:** This Application consist of 4 pages, [Sections (A) - (I)]. Incomplete Applications will **NOT** be considered or returned. Make sure you comply with the Application Guide Check List.

*Application must be postmarked or Emailed no later than February 18,2025*

**(B) Scholastic Data**

**NAME of YOUR HIGH SCHOOL** \_\_\_\_\_

**EXPECTED GRADUATION DATE** \_\_\_\_\_

**UNWEIGHTED GPA – Year by Year : FR** \_\_\_\_\_ ; **SO** \_\_\_\_\_ ; **JR** \_\_\_\_\_ ; **SR** \_\_\_\_\_

**SAT SCORES: VERBAL** \_\_\_\_\_ ; **MATH** \_\_\_\_\_ **COMBINED** \_\_\_\_\_

**COMPOSITE ACT SCORE:** \_\_\_\_\_

**List your participation in School Clubs, Offices and Activities:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(If additional space is needed for any Section, please attach additional sheet listing your name and identifying Section letter and title at top right corner)*

**(D) Italian Ancestry**

**(1) Scholarship Recipients must be of Italian descent (full or partial).** Enter below, as fully as feasible, the ancestral data requested, for your stated relatives: If called upon for an interview please be prepared to discuss your Italian heritage and its personal impact in your life or your family's.

**NAME** (Last, First) \_\_\_\_\_ **BIRTH PLACE** (City/Town; State or Italian Region; Country) \_\_\_\_\_

Your Father's

Your Mother's (Maiden) \_\_\_\_\_

Your Paternal Grandparents'

\_\_\_\_\_

Your Maternal Grandparents'

\_\_\_\_\_

**(2) Enter such other information, e.g., other ancestors' data you deem appropriate, to establish your Italian descent qualification. Include as much detail as possible. Add additional sheets.**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

***(E) Essay***

Attach your Essay, Minimum 500 to 750 words. **Topic – *Maria Montessori, Physician and Educator***, her life and how her Italian heritage contributed to our society and made it better. . (Footnotes and citations, to include sources consulted **besides** Wikipedia, shall not be considered in calculating the essay’s 750 word limit).

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***(F) Colleges & Universities***

**(1) List the Colleges & Universities to which you have applied for admission & indicate those that have accepted you:**

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**(2) List your planned major and minor concentrations:**

MAJOR \_\_\_\_\_; MINOR \_\_\_\_\_

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***(G) Personal & Community Interests***

**(1) List Community Organizations & Activities in which you have been involved:( additions sheets may be added.)**

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**(2) List your interests, hobbies, pastimes and leisure activities:**

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***(H) Work Experience***

**List any work experience and indicate if you are currently employed:**

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***(I) Certification & Terms of Award***

BY MY SIGNATURE BELOW I, THE APPLICANT, CERTIFY THAT I AM OF ITALIAN DESCENT; THAT I HAVE READ AND UNDERSTAND THE GUIDE TO THE PREPARATION OF THE 2020 APPLICATION AS WELL AS THE REQUIREMENTS OF THE APPLICATION, AND THAT I INTEND TO ENROLL AS A FULL-TIME STUDENT IN AN ACCREDITED INSTITUTION OF HIGHER EDUCATION, IMMEDIATELY UPON GRADUATION FROM HIGH SCHOOL.

I UNDERSTAND THAT ANY UNUSED PORTION OF THE SCHOLARSHIP WILL BE RETURNED TO THE **GULF COAST ITALIAN CULTURE SOCIETY, Inc. (GCICS)**, IF I CEASE TO ATTEND CLASSES AND/OR WITHDRAW FROM THE SELECTED INSTITUTION, WITHOUT IMMEDIATE ENROLLMENT AND/OR TRANSFER TO ANOTHER ACCREDITED INSTITUTION.

IT IS ALSO UNDERSTOOD THAT UPON SUBMISSION, THE ESSAY BECOMES THE PROPERTY OF GCICS, WHICH MAY BE EDITED, PUBLISHED OR DISPOSED AS THE GCICS SEES FIT. THE APPLICANT MAY BE ASKED TO READ HIS/HER SUBMISSION DURING THE AWARD CEREMONIES. FURTHER, APPLICANT COMMITS TO ATTEND THE SCHOLARSHIP GALA AS A GUEST OF THE GCICS.

\_\_\_\_\_, 2025  
 (Applicant's Signature & Printed Name) (Date)

\_\_\_\_\_, 2025  
 (Parent's / Guardian's Signature & Printed Name) (Date)

**Every item of this application must contain a response. Incomplete applications will neither be considered nor returned.**

Scholarship winners will be notified no later than March 22, 2025.

MAIL OR EMAIL COMPLETED, FOUR (4) PAGE APPLICATION, ON OR BEFORE **February 18, 2025** WITH THE SUPPORTING DOCUMENTATION SPECIFIED ON THE 2025 GUIDE APPLICATION ADDRESSED TO:

**Sandra Russell  
 GCICS Scholarship Chair  
 5743 Wilena Place  
 Sarasota, FL 34238**

ABOUT US. Founded in 1990, the Gulf Coast Italian Culture Society, Inc. (GCICS) is an IRS recognized tax exempt §501.(c).(3) non-profit organization whose members spring from all walks of life and ancestral diversity, bonding together to enjoy Italian culture and promote its dissemination and preservation.

The GCICS is also committed to support future community leaders by offering merit scholarship to area college bound high school seniors of (all or partial) Italian ancestry. For additional details on GCICS we invite you to check our website: [www.gcics.org](http://www.gcics.org).