

Katie DeCubellis Memorial Foundation Scholarship Application

2011

The Katie DeCubellis Memorial Foundation is a local non-profit organization established in the memory of Katie DeCubellis, a 13-year old Narragansett student killed by a drunk driver on October 29, 1999. The KDMF seeks to help others and to make our community a better place in which to live. In so doing, the KDMF annually provides a variety of scholarships to high school seniors about to further their education in a technical program or in a two- or four-year college program.

The KDMF awards one annual “Katie DeCubellis Memorial Scholarship” in the amount of \$4,000* to a Senior high school student and Narragansett resident, who best exemplifies Katie’s qualities of friendship, community service and academic excellence. Applicants should maintain a “B” or better average and demonstrate a strong commitment to extracurricular activities and community service.

*The scholarship shall be renewable for three years resulting in a total award of \$4,000, provided the recipient completes 25+ hours of community service in college, maintains good academic standing, maintains full-time enrollment, has complied with their school’s policy on substance abuse as set forth in the student handbook and has not been charged with any disciplinary action by the school.

Please complete the attached application and return to your high school guidance office **NO LATER THAN APRIL 29, 2011**. Late applications will not be accepted.

Please provide the following information:

1. Katie DeCubellis Memorial Foundation Scholarship Application.
2. High school transcript.
3. List of school and community activities.
4. **Essay:** *Please explain how your community is a better place because of the contributions you have made throughout your high school career, and explain your educational goals for the future. (two-page minimum)*
5. All sections of the application must be completed in order for the application to be considered.

All information provided is confidential and for the exclusive use of the Katie DeCubellis Memorial Foundation Scholarship Committee.

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Name: _____

Address: _____

Home/Cell Phone: _____

E-Mail Address: _____

High School: _____

Father's Occupation: _____

Annual Salary: _____

Mother's Occupation: _____

Annual Salary: _____

Number of children in family in college: _____

College/School you will be attending: _____

Tuition: _____

Room and Board: _____

Post Graduate Plans: _____

Student's Signature: _____

Parent's Signature: _____