



# Peter Vitazoslav Rovnianek Scholarship Fund



**NSS Life**

*Family Matters...*

## **APPLICATION FOR A SCHOLARSHIP GRANT 2007-2008 SCHOOL YEAR**

To be eligible, applicants must submit the following with this completed application:

- ▶ Highschool Transcript or if attending college, College Transcript
  - ▶ Proof of Acceptance to accredited school
  - ▶ Resume or biographical sketch
  - ▶ Recent photograph for publication (photo will *not* be returned)
- Proof of Fraternal Activity, Community Service or Volunteer Activity with signed verification from an Assembly Officer or an adult in charge where the community service or volunteer work is performed.

I, \_\_\_\_\_ hereby make application for a Scholarship Grant as a member of the National Slovak Society through Assembly No. \_\_\_\_\_, Certificate No. \_\_\_\_\_.

Home Address \_\_\_\_\_  
Street City State Zip Code  
 ( ) - / /  
Phone Number Date of Birth (Month-Day-Year)

High School: \_\_\_\_\_  
Date of Anticipated Graduation

School Address: \_\_\_\_\_  
Street City State Zip Code

College/University Name: \_\_\_\_\_

College/University Address: \_\_\_\_\_  
Street City State Zip Code

Indicate course of studies you will pursue (or are pursuing) while in College (i.e., pre-medical, teaching, law, etc.)

\_\_\_\_\_

I hereby certify that this application contains no misstatements or omissions of material fact and that the statements herein are complete and correct to the best of my knowledge and belief.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

**HIGH SCHOOL STUDENTS MUST SUBMIT A COMPLETE TRANSCRIPT OF GRADES TO DATE.  
 FOR THOSE ALREADY ATTENDING COLLEGE, ONLY COLLEGE TRANSCRIPTS NEED TO BE SUBMITTED.  
 APPLICATION WILL NOT BE CONSIDERED WITHOUT THIS INFORMATION.**

**Please Mail Completed Applications to: National Slovak Society 351 Valley Brook Road McMurray PA 15317  
 Phone (724) 731-0094 Fax (724) 731-0145**