Joseph F. Salino Memorial Scholarship Submission

Note: In order for an application to be reviewed, all of the following items must be submitted to the Association Administrator at headquarters before March 15. PREVIOUS RECIPIENTS ARE NOT ELIGIBLE TO REAPPLY. THIS IS A ONE-TIME AWARD.

- 1. Properly completed scholarship application, and
- 2. Whichever pertains:
 - A. Copy of high school grade transcript along with copy of acceptance letter from college/university you are planning to attend and notarized or verified copy of SAT/ACT test results OR
 - B. Copy of most recent college grade transcript including cumulative GPA.
- 3. A letter written by applicant containing the following:
 - A. Field you plan to major in/are currently majoring in
 - B. Your plans for the future
 - C. A list of activities school, extracurricular and community
 - D. Awards received
- 4. Letter of recommendation from High School Principal, Assistant Principal or Guidance Counselor from school you are presently attending or school from which you graduated.
- 5. Completed "Qualifications for Scholarship Recipient" section below.

Qualifications for Scholarship Recipients

previously stated.

Note: In order for an application to be considered, at least one item in each section must be checked.

Section 1
The applicant must be a United States citizen and the sponsor must be a Pennsylvania Certified/Registered Applicator an An owner of a pest control company which has maintained active membership in the PPMA for a minimum o four (4) years and is currently an active member in good standing. An employee who has worked full time for a minimum of four (4) years for an active member in good standin with the PPMA.
Section 2
— Has been accepted as a full time student as defined by an accredited 4-year college/university or a full time student in a 2-year associate degree program leading to an Associate Degree and/or Bachelor's Degree. — Is currently enrolled in a program as described above.
Section 3
Has at least two of the following:
A. "B" high school grade average or GED equivalent.
B. Minimum of 900 combined SAT score (Critical reading and math scores only).C. If not attending college, minimum of 2.8 cumulative college GPA.
Section 4
The sponsor must be a Pennsylvania certified/registered applicator and/or work in a Pennsylvania branch office.
Section 5
Signature Date
I certify that the above information is true and correct.

A natural, adopted, legal guardian child, or member of the household of a person who meets the qualifications

Joseph F. Salino Memorial Scholarship Application

Date (PPMA) Received						
Applicant's Full Name:						_
Home Phone.	e PhoneSocial Security No					
Birth:						
Attended:						
State						
Year of Graduation				Totai # in Class		_
Grade Point Average:		Combined	SAT Score:			_College
Presently Attending:					City ar	nd State:
		Year of Graduation				
Have you ever been susper	nded from school/co	ollege for disciplinary reason	s? [] Ye	s []No		
Have you ever been convid	cted of or pleaded g	uilty to a felony? []	Yes [] No			
if you have answered Yes to	either questions, in	dude explanation in "Remar	ks" section,			
Applicant's Employer		 				Address:
					Phone:	
		Immediate Supervisor				
Previous pest managemen	nt industry employm	nent				
Company:		Company_				_
Address:		Address				_
From:	_To:	From:	To:		<u> </u>	
Name of parent/guardian			_Phone:	¥.		_
Address:		· · · · · · · · · · · · · · · · · · ·				_
Employer			_Phone:			Address
Number of years with preser	et empleyer	Position				
				diam'tana		
Remarks: Use this space, a	ind additional pages	s as needed, to explain/exp	and upon any ear	nier items.		
						_
			55 555			_
Applicant's Signature			Phone			
Sponsoring Company:		PA Busine				
Member in good standing of	FPMA for minimun	n of 4 years [] Ye s	[] No			
Licensed PMP's Name (Prin	t)					_
PA Certification #						_
PMP's Signature						213