



New York Chapter Continental Societies, Inc.
 PO Box 1166, Lenox Hill Station, New York, NY 10065
Scholarship Application

APPLICATION MUST BE COMPLETED ON THIS AUTOMATIC FILL-FORM
Email to: Dr. Sheilah Bobo, NYCSI Scholarship Co-Chair, sheilahbobo@gmail.com
DEADLINE FOR SUBMISSION: APRIL 30, 2025

PERSONAL INFORMATION

(Applicant signature grants Continental Societies, Inc. permission to use your photo in Continental related publications)

DATE _____

NAME

LAST	FIRST	MIDDLE
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HOME ADDRESS

CITY	STATE	ZIP CODE
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HOME PHONE _____ **ALTERNATE OR CELL PHONE** _____ **E-MAIL** _____

DATE OF BIRTH _____

NAME OF HIGH SCHOOL

ADDRESS		
CITY	STATE	ZIP CODE

GRADUATION INFORMATION

EXPECTED DATE OF GRADUATION	CUMULATIVE GPA
DIPLOMA () YES () NO	GED () YES () NO

PLEASE IDENTIFY THE INSTITUTIONS YOU WOULD LIKE TO ATTEND			
NAME	CONTACT PERSON		
ADDRESS	PHONE NUMBER		
CITY	STATE	ZIP CODE	E-MAIL

SUBSTANTIATION OF ACCEPTANCE OR ENROLLMENT MUST BE PROVIDED
PLEASE LIST ANY COLLEGE(S) YOU ARE CURRENTLY ATTENDING OR HAVE ATTENDED,
INCLUDING ANY PRE-COLLEGE OR ADVANCED PLACEMENT COURSEWORK.

INSTITUTION	COURSE	DATES	GRADE

APPLICANT'S SIGNATURE

PARENT/GUARDIAN'S SIGNATURE