



## Long Island Air Force Association Education and Charitable Fund

**\$1,000 Long Island Scholastic Grant program in honor of:  
Colonel Francis S. Gabreski Scholastic Grant Award Application  
Lt. Colonel Alphonse A. Parise Scholastic Grant Award Application  
Scholastic Grant Guidelines**

**Award Amount:** \$1,000

**# of Awards:** Two

**Qualifications:** **Restricted to the Military Family residing on Long Island (Nassau and Suffolk Counties)**

- Children of Active Duty Military; Army and Air National Guard; All Reserve Components.
- Children and grandchildren of Retired Military Members and Honorably Discharged Veterans.
- U.S.A.F. Auxiliary (CAP) Cadets, Navy Sea Cadets
- Junior ROTC Cadets.

**Credentials:**

- High School Senior (Male or Female).
- 80% or better cumulative average.
- Accepted for matriculation in a two or four year degree program at a regionally accredited College or University anywhere in the United States.
- Demonstrate involvement in school related extra-curricular activities or community service (certificates, letters, articles accepted to confirm participation).

**Requirements:** If you are eligible for one of these grants you may apply by providing the following:

- This completed application including the Student Profile Parts A through D
- An official transcript of student's high school record.
- One or more letters of recommendation from individuals not related to the applicant.
- Copy of military member's DD form 214 if applicant is dependent of a retired or honorably discharged individual.
- Applicants selected for the Grants will submit a copy of the bursar receipt of matriculation from an institution of higher education to receive payment.

**Deadline:**

Completed applications, transcripts and other information must be received by the Scholastic Grant committee no later than June 30 of each year.

Mail Your Completed Application To:

William Stratemeier, Long Island AFA Treasurer  
PO Box 713  
Quogue, NY 11959

Email any questions to Fred Di Fabio, Chapter President  
[fdifabioafa202@hotmail.com](mailto:fdifabioafa202@hotmail.com)



# Long Island Air Force Association Education and Charitable Fund

## Scholastic Grant Award Application

### STUDENT INFORMATION

NAME		FIRST		MIDDLE	
HOME STREET ADDRESS			CITY	STATE NY	ZIPCODE
EMAIL ADDRESS			MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	DATE OF BIRTH
HOME PHONE #	NAME OF HIGH SCHOOL			HIGH SCHOOL PHONE #	
AREA OF STUDY YOU INTEND TO FOLLOW:					
A) COLLEGES/UNIVERSITIES YOU APPLIED TO:			B) COLLEGES/UNIVERSITIES AT WHICH YOU WERE ACCEPTED:		
C) WHICH SCHOOL WILL YOU MOST LIKELY ATTEND?					

### STUDENT PROFILE

<b><u>PART A</u></b> Information Regarding Applicant and Family:	
1. Is your father living? Y <input type="checkbox"/> N <input type="checkbox"/>	Is your mother living? Y <input type="checkbox"/> N <input type="checkbox"/>
2. Father's Occupation?	Mother's Occupation?
3. On whom do you depend for financial support?	
4. What is your military affiliation?	

<b><u>PART B</u></b> Information Regarding School and Community Volunteer Activities: (List only those in which you actively participated. If you require additional space, use additional sheets )
<b>1. SCHOOL CLUBS AND ORGANIZATIONS:</b>
<b>OFFICES HELD:</b>



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2. SPORTS (SCHOOL OR COMMUNITY):
LEADERSHIP POSITIONS:
3. COMMUNITY VOLUNTEER ACTIVITY:
OFFICES HELD:

<b><u>PART C</u></b> Financial Information:			
Estimated Cost for One School Year		Estimated Resources Available	
Tuition	\$	From Savings	\$
Fees	\$	From Parents	\$
Books	\$	From Work	\$
Room & Board	\$	From Other Sources	\$
Travel	\$	From Other Sources	\$
Personal	\$	Scholarships and Grants (confirmed)	\$
<b>Total</b>	<b>\$</b>	<b>Total</b>	<b>\$</b>
<b>Amount Still Needed to Cover Estimated Cost \$</b>			

**PART D** Student Statement:

Please submit a personal statement of not less than 250 words and not more than two single spaced pages describing your experiences, major achievements (including any special honors earned) and after high school plans including career or family situations which will affect your ability to attend college.

**THIS IS THE MOST IMPORTANT PART OF YOUR APPLICATION. THIS STATEMENT MUST BE YOUR OWN WORK. WHEN COMPLETED, PLEASE SIGN AND DATE YOUR STATEMENT.**

*((Use additional paper as necessary))*