



February 2, 2018

Reference: Michael LaViola Foundation Scholarship(s)

The Michael LaViola Foundation is offering (2) two \$2,000 scholarships to students graduating from NVOT high school in 2017 who plan to continue his/her education at a four year accredited college.

The first scholarship is the Michael LaViola Foundation Football Scholarship. to a graduating **student/football player** who played **four consecutive years** at NVOT. Please see attached application.

The second scholarship is the Michael LaViola Foundation Medical Scholarship to a graduating student from NVOT who will pursue their education in the **medical field** (e.g. Nursing, Research, Pharmaceutical, Physical Therapy, etc.) Please see attached application.

Please return the completed application to The Michael LaViola Foundation 48 Bi-State Plaza, PMB 239, Old Tappan, NJ 07675 **NO LATER THAN MAY 4, 2017**. A letter stating why it is important to you to receive one of these scholarships **"must accompany"** the application as well as your school transcript.

All information provided in this application will be kept confidential. Failure to provide all of the requested information or reasons why it cannot be provided will be cause to eliminate the applicant from consideration.

If you have any questions regarding this application, please do not hesitate to contact me at the email provided below.

Warmest regards,

Mary LaViola  
President  
Michael LaViola Foundation  
Email: [mary.laviola@era.com](mailto:mary.laviola@era.com)

## Michael LaViola Foundation Medical Scholarship Award Application

**Michael LaViola Foundation Medical Scholarship is awarded to a graduating student from Northern Valley Regional High School Old Tappan who will pursue their education in the medical field (e.g. Nursing, Research, Physician, Pharmaceutical, Physical Therapy, etc.)**

I hereby apply for a scholarship from the Michael LaViola Foundation and submit the following:

1. A letter from me stating why it is important that I receive this scholarship. (Also include in your letter any additional information you would like to provide the committee that is not covered in the application form.)
2. Your High School transcript
3. The completed application signed by me and by one of my parents or Guardians signifying his or her approval.

**Please note that failure to provide all of the requested information or reasons why it cannot be provided will be cause to eliminate the applicant from consideration.**

COMPLETE THE FOLLOWING: (Attached additional pages if necessary.)

1. Name \_\_\_\_\_  
(Last) (First) (Middle)
2. Home Address \_\_\_\_\_
3. Telephone: \_\_\_\_\_
4. Date of Birth \_\_\_\_\_
5. Father's Full Name: \_\_\_\_\_
6. Father's Address: \_\_\_\_\_
7. Mother's Full Name: \_\_\_\_\_
8. Mother's Address: \_\_\_\_\_
9. Father's Employer: \_\_\_\_\_ F/T \_\_\_\_\_ P/T \_\_\_\_\_
10. Mother's Employer: \_\_\_\_\_ F/T \_\_\_\_\_ P/T \_\_\_\_\_
11. List # of People Living in Your Home: Father \_\_\_\_\_ Mother \_\_\_\_\_ Other \_\_\_\_\_
12. List Ages of Siblings \_\_\_\_\_ How Many Are In College Now \_\_\_\_\_

13. High School Record – Please provide your GPA average: \_\_\_\_\_  
(Please provide copy of High School Record)

14. S.A.T. Scores: Verbal \_\_\_\_\_ Math \_\_\_\_\_

15. What Special Recognition have You Received for Outstanding Academic Work  
Such as Honors, Prizes, Awards, Etc.

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16. List the School Related Activities You Have Engaged In During Your High School  
Years. (Include Special Recognition, Offices Held and Years Involved).

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17. List the Community Activities You Have Engaged In During Your High School  
Years. (Include Volunteer, Church, Scouting, Etc. and Years Involved).

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18. Describe Your Work Experience during High School (What Kind of Work Did You  
Do Including Summers, Specify Paid or Volunteer, Include Family and Outside Employers).

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19. List the Colleges to Which You Have Applied for Admission (in order of preference) and whether you have been accepted.

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20. Which College do you Plan to Attend \_\_\_\_\_

21. What Course of Medical Study Will You Pursue \_\_\_\_\_

22. Have You Been Awarded Any Scholarship or Financial Aid \_\_\_\_\_ (If Yes, Please List) \_\_\_\_\_

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23. Describe Your Hobbies or Special Interests \_\_\_\_\_

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I certify that all statements contained in this application and the accompanying letter are true and correct, and that I believe that I am eligible to apply for the scholarship.

Applicant's Signature \_\_\_\_\_

Date: \_\_\_\_\_

This application and the accompanying letter meets with my approval:

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_