

**Student Application for the Dr. Adrienne Robb-Fund/Fund Family Scholarship**

PTA UNIT NAME: \_\_\_\_\_ PTA UNIT CODE: 10-\_\_\_\_\_

PTA UNIT PRESIDENT'S SIGNATURE: \_\_\_\_\_

*Student must attend a high school in Nassau County with a PTA/PTSA unit in good standing.*

*The Adrienne Robb-Fund/Fund Family Scholarship is for a student who is graduating from a Nassau County Public high school and who demonstrated resiliency in overcoming obstacles to learning; be it academic, language, social, emotional or due to special needs. One \$500 scholarship shall be awarded annually.*

**Name of Student:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone # of Student:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Name of Parent/ Guardian:** \_\_\_\_\_

**Phone # of Parent/Guardian:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Name of High School:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Guidance Counselor:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Signature of Guidance Counselor or Principal:** \_\_\_\_\_

**List your post-graduation plans:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List your activities in school:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List any activities outside of school, including work experiences you have had:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please attach a statement of three to four paragraphs describing the obstacles you have faced and why you should be the recipient of this scholarship. The statement can be handwritten or typed.**

I have read the information about this scholarship. My parent/guardian and I give permission for a designee of Nassau Region PTA to contact my guidance counselor should you require further information.

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**CHECK LIST: PLEASE BE SURE THAT YOU HAVE INCLUDED ALL OF THE FOLLOWING:**

- PTA Unit President's Signature and PTA information*
- Signatures required from the student and parent or guardian and guidance counselor or principal*
- Student statement*

Mail application to:

Attn: Fund Family Scholarship  
Nassau Region PTA  
Laurie May  
35 Hidden Lane  
Westbury, NY 11590

**Application must be postmarked by March 15 of the student's graduating year.**