**PATRICIA MANGOLD SCHOLARSHIP APPLICATION**

***Sponsored by Yonkers Historical Society***

 Name: Date of Birth:

Address: Telephone #:

Present School:

Father’s Name: Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name: Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Family Members:

 Name(s) Age School or Occupation

Career in which you are interested:

School or college in which you will enroll:

Other Scholarships received:

1. Amount:

2. Amount:

3. Amount:

 Total Amount:

Are you presently employed? If yes, salary:

If you receive this scholarship, how will it help you?

Could you attend college or school without this scholarship? Yes No

Hobbies:

Signature: Date:

**Attach student transcript to this packet**