



Sean P. McCullough Memorial Scholarship

Deadline: May 1st

Name of student _____

Address _____

Town _____ State: NY Zip _____

Telephone _____ E-mail Address _____

Name of the high school _____

Date of graduation/awards night _____

Name of school student plans to attend _____

How many years has this student been on the track team? _____

Please provide one example demonstrating the student's dedication to the sport:

Please provide one example demonstrating the student's strong team leadership:

Please provide one example that defines the student's competitive spirit:

Please provide student's GPA and/or class rank as demonstration of the academic strength: _____

Please provide one example that embodies the student's school spirit:

Are there any family or individual circumstances that make this student stand out?

List of up to 5 volunteer/school/community activities in which the student participates.

Name of Nominating Coach _____

Signature _____ Date _____

Address at school: _____

Telephone: _____ E-Mail: _____

Return to Adirondack Community Foundation, PO Box 288, Lake Placid, NY 12946 or via email to:
leslee@adkcommunityfoundation.org