NORTHERN NEW YORK COMMUNITY FOUNDATION, INC.

131 Washington Street • Watertown, NY 13601 315-782-7110 nnycf.org • maryp@nnycf.org | tara@nnycf.org

2025 Donald and Bernice Gardner Memorial Scholarship

Students in grades 7-12 attending Immaculate Heart Central Schools

Qualifications

• Applicants must be a student of Immaculate Heart Central School system, grades 7-12.

• Preference will be given to students who are active in their faith community.

Selection Criteria

Recipients of the **Donald and Bernice Gardner Memorial Scholarship** are chosen based on financial need and demonstrated involvement in their given faith. Students do not have to be Catholic to be considered for the scholarship – students of any denomination may apply.

Instructions

Read all materials completely so you understand what is available, the criteria, and what is expected of you.

Materials must be submitted as a complete packet in order to be considered for a scholarship. Packets must be received by May 1, 2025 – packets postmarked after May 1 will not be considered.

Packets MUST include the following items:

_____ Application – please do not forget to sign your application

_____ Letter of recommendation from your faith leader

Scholarship

Recipients of the **Donald and Bernice Gardner Memorial Scholarship** will receive a one-year, \$1,000 scholarship, toward tuition at Immaculate Heart Central.

NORTHERN NEW YORK COMMUNITY FOUNDATION, INC. 131 Washington Street * Watertown, NY 13601

The Donald and Bernice Gardner Memorial Scholarship

Students in grades 7-12 attending Immaculate Heart Central Schools

Name	
Address	County
	Phone (home)
E-mail	Phone (cell)
High School Graduation Date	Gender (circle one) Male or Female
How did you learn about our scholarship program?	
Where is your place of worship? (<i>church, temple, syna</i>	gogue, community center etc.)
How long have you attended the above place of worsh	ip?
Why have you chosen to attend Immaculate Heart Cen	tral School?
Please discuss your involvement in your place of worsh it relates to your faith – you may also include involvem	hip below. Give specifics about your involvement and how nent in your community.

Please explain any unusual hardships, special family, or personal circumstances you would like the scholarship committee to take into consideration when reviewing your application.

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature	Date
Parent and or Guardian Signature	Date

Application, along with a recommendation from your faith leader, is due to the Northern New York Community Foundation by May 1, 2025.

Mail to: Northern New York Community Foundation, 131 Washington St., Watertown, NY 13601