



**villa charities**

## Scholarship Program

### Application Form

Please indicate which Scholarship you are applying for:  Villa Charities Undergraduate Student Scholarship  
 Villa Charities Graduate Student Scholarship

### General Information

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Home Address Number/Street/Apt.: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Date of Birth (MM/DD/YY): \_\_\_\_\_

Languages spoken/written: English  French  Italian  Other  (please specify) \_\_\_\_\_

Are you a Canadian citizen or have permanent-resident status? YES  NO

Are you of Italian descent? YES  NO  If YES, please provide details:

Have you received other financial assistance for the 2020/2021 school year? YES  NO

If YES, Amount: \_\_\_\_\_ Source of funding: \_\_\_\_\_

### Education Information

Name of Post-Secondary institution: \_\_\_\_\_

Please include proof of admission and/or registration

Address of institution: \_\_\_\_\_

Department/faculty and major: \_\_\_\_\_

What program year will you be in, fall 2020? Second  Third  Fourth

Expected degree and graduation date: \_\_\_\_\_

What is your cumulative grade point average (GPA)? \_\_\_\_\_

Please include a copy of your most recent transcript

### Employment History

List each employer (full-time or part-time) separately, starting with the most recent.

Option: Attach a resume when you submit your application via email

\_\_\_\_\_  
\_\_\_\_\_



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### Supplemental Questions

Please list your past/present leadership experience and community service involvements.

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Villa Charities' mission is to enrich lives through experiences and services that honour Italian culture and heritage. Why/how is Italian culture meaningful to you? Can you demonstrate special interest in Italian heritage and culture? (500-1,000 word maximum) Option: Attach a Word Document or PDF

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Are you willing to schedule a meet and greet at Villa Charities Inc.? YES  NO

(Located at 901 Lawrence Ave. West, Toronto)

I, undersigned, do hereby declare that information contained herein, and the accompanying documentation is true, accurate and complete, and that the supporting documents originate from the appropriate authorities.

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(MM/DD/YY)

Signature: \_\_\_\_\_

### Name and Photo Consent and Release Form

I hereby give my consent to Villa Charities Inc., Villa Charities Foundation and their affiliates, to use my image and likeness and/or any interview statements from me in their publications, advertising or other media activities (including the Internet). This consent includes, but is not limited to:

- a) Permission to interview, film, photograph, tape, or otherwise make a video reproduction of me and/or record my voice;
- b) Permission to use my name, academic institution and program, year of graduation; and
- c) Permission to use quotes from the interview(s) (or excerpts of such quotes), the film, photograph(s), tape(s) or reproduction(s) of me, and/or recording of my voice, in part or in whole, in its publications, in newspapers, magazines and other print media, on television, radio and electronic media (including the Internet), in theatrical media and/or in mailings for educational and awareness.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(MM/DD/YY)