

Nicandri Nature Center
315-705-5022

Peter J Sainola Sr Memorial Scholarship
Application

NAME : _____

ADDRESS: _____

PHONE: _____ GPA: _____ RANK: _____

PARENTS/GUARDIANS: _____

PARENTS EMPLOYERS: _____

SIBLINGS SUPPORTED BY PARENTS & AGES:

NAMES OF SCHOLARSHIPS ALREADY RECEIVED & AMOUNT OF AWARD:

COLLEGES OR UNIVERSITIES	APPLIED	ACCEPTED
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

PLANNED MAJOR: _____

****ATTACH YOUR 2 PAGE ESSAY & 2 RECOMMENDATIONS****

*Scan and email to: info@massenanaturecenter.com or mail to:
Nicandri Nature Center
PO Box 408
Massena, NY 13662*