Michael C. Fanello Memorial Scholarship

This scholarship is in remembrance of Michael C. Fanello. Michael and his wife Sherry spent over 40 years as a resident of Lucas. Michael cherished the small town atmosphere that Lucas offers and valued having the opportunity to raise his 3 sons here, which all graduated from Lucas. Along with being heavily involved in extracurricular activities at Lucas Schools, Michael served on the Lucas School Board for 16 years as a board member, Vice President and President. Michael's life was cut short at the age of 62, on October 15, 2010. His memory will live on through the Michael C. Fanello Memorial Scholarship. At the conclusion of each school year, there will be \$1000 presented to a deserving Lucas High School Senior.



The Michael C. Fanello Memorial Scholarship is a \$1,000 scholarship, which is available to qualified students over a two-year period. A check will be issued to the student in the amount of \$500 each year of successful completion of coursework. Upon successfully completing your first quarter/semester of your Freshman and Sophomore year submit your transcript to the Lucas Treasurer.

Criteria:

- 1. Applicant must have achieved a minimum High School 2.50 GPA
- 2. Applicant must have been accepted at an Institution of higher learning.
- 3. Applicant must possess good character, positive attitude, and leadership qualities as demonstrated by their involvement in school and community activities.
- 4. Applicant is to have an evaluation form filled out by the High School Principal, Guidance Counselor, Senior Year Teacher, School Advisor/Coach, and Community Advisor.
- 5. Applicant must turn in all required information to the Guidance Office by the first *Friday in April.*

Presentation of Scholarship:

The announcement of the recipient of the Michael C. Fanello Memorial Scholarship will take place at the Lucas High School Graduation Ceremony.

APPLICATION FORM FOR THE Michael C. Fanello Memorial Scholarship

(To be completed by the student applicant, typed or printed legibly in black ink.)

LAST NAME	FIRST		MIDDLE
ADDRESS: STREET	CITY	ZIP CODE	TELEPHONE NUMBER

NAME OF COLLEGE OR UNIVERSITY TO WHICH YOU HAVE BEEN ACCEPTED

Extracurricular Activities (i.e. School related athletics, clubs.) Check the grades when the activities occurred.

Activity	9 th grade	10 th grade	11 th grade	12 th grade	Leadership Positions/Honors

Community Involvement/Service (i.e. Church, LEO's) Check the grades when the activities occurred.

Activity	9 th grade	10 th grade	11 th grade	12 th grade	Leadership Positions/Honors

I affirm that all information provided is true to the best of my knowledge.

Briefly describe where you see yourself in 1, 5, and 10 years from now.

Why do you feel you are deserving of the Michael C. Fanello Memorial Scholarship?

Michael C. Fanello Memorial Scholarship Applicant Evaluation Form

Name of Applicant: Please rate the applicant in each of the following areas on a scale of 1 (lowest) to 5 (highest). If you have no basis for an evaluation in any area please mark the NB blank. 1 _____ 2 ____ 3 ____ 4 ____ 5 ____ NB ____ Motivation *Comments:* 1_____ 2____ 3____ 4____ 5____ NB____ Leadership *Comments:* Communication skills: 1 ____ 2 ___ 3 ___ 4 ___ 5 ___ NB ____ *Comments:* Ability to work with others: 1 ____ 2 ___ 3 ___ 4 ___ 5 ___ NB ____ *Comments:* Potential for Success: 1 ____ 2 ___ 3 ___ 4 ___ 5 ___ NB ___ Comments:

Any additional comments to aid in evaluating this applicant: (may use the back)

Name of Evaluator_____ Title of Position _____

Signature
