

***BUFFALO POLICE OFFICER DAVID J. SCIME FINANCIAL SCHOLARSHIP AWARD***

***ERIE COUNTY SHERIFF DEPUTY ROBERT S. INSALACO FINANCIAL SCHOLARSHIP AWARD***

**GUIDELINES**

**All applications must be completed in full to be considered and received by May 15th.**

Scholarships will be awarded on the last Wednesday of June.

1. Applicant must be a resident of Western New York.
2. Applicant must be a senior in High School.
3. Applicant must be accepted to a certified college for the Fall 2023 term.
4. Applicant must have a minimum average of 80 percent.
5. Applicant must submit to an interview by the awards committee if requested to do so.
6. Award Amount: \$250 to \$\_\_\_\_\_

The Association encourages all students to apply.

Completed applications should be sent to:

Italian-American Police Association  
P.O. Box 1194  
Ellicott Station  
Buffalo, NY 14205

Stephen J. Lanza  
President  
Italian-American Police Association

**Application 2023**

**David J. Scime Financial Scholarship Award**

**Robert S. Insalaco Financial Scholarship Award**

These scholarship awards are sponsored by the Italian-American Police Association in memory of two deceased members of our association who were killed in the line of duty; Erie County Sheriff Robert S. Insalaco, (August 13, 1987) and Buffalo Police Officer David J. Scime (September 5, 1974).

It is the hope of our association that through the memory of our fallen brothers, a motivated student may be assisted in the furtherance of his or her college education. These scholarship awards are made available to any senior at any high school in Erie or Niagara County, who meet the established guidelines.

Please fill in all information requested.

**NAME:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_ **SEX:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**DATE OF HIGH SCHOOL GRADUATION:** \_\_\_\_\_

**COLLEGE ATTENDING:** \_\_\_\_\_

**COLLEGE ADDRESS:** \_\_\_\_\_

**COLLEGE PHONE NUMBER:** \_\_\_\_\_

**HAVE YOU BEEN ACCEPTED FOR ATTENDANCE IN SEPTEMBER?** \_\_\_\_\_

**TOTAL NUMBER OF CHILDREN IN YOUR FAMILY RESIDING AT HOME:** \_\_\_\_\_

**TOTAL FAMILY INCOME FROM ALL SOURCES (LAST YEAR) CHECK ONE:**

                                                    

Less than \$20k   \$20k-\$30k   \$30k-\$40k   \$40k-\$50k   \$50k-\$60k   \$60k-\$70k   \$70k-\$80k   \$80k-\$90k   \$90k-\$100k   Above 100k

**DO ANY OF YOUR BROTHERS OR SISTERS ATTEND COLLEGE:** \_\_\_\_\_

**IF YES, HOW MANY AND WHERE:** \_\_\_\_\_

**STATE BRIEFLY ANY CIRCUMSTANCES WHICH MIGHT HAVE SOME INFLUENCE OVER THE COMMITTEE'S FINAL DECISION:**

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**PLEASE OBTAIN AT LEAST TWO LETTERS OF REFERENCE FROM A HIGH SCHOOL TEACHER OR ADMINISTRATOR, AND SUBMIT THEM WITH YOUR APPLICATION.**

**IF CALLED, WILL YOU BE AVAILABLE FOR AN INTERVIEW BY THE AWARDS COMMITTEE?** \_\_\_\_\_

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Rank:** \_\_\_\_\_

**RETURN THIS COMPLETED APPLICATION ALONG WITH A COPY OF YOUR HIGH SCHOOL TRANSCRIPT TO THE ADDRESS LISTED ON THE "GUIDELINES" PAGE.**

