



FARMINGDALE YOUTH COUNCIL, INC.
2025 COMMUNITY SERVICE SCHOLARSHIPS

GIVEN IN MEMORY OF

MURRAY TUCK AND DR. GARY E. KARP

OPEN TO FARMINGDALE SCHOOL DISTRICT RESIDENTS GRADUATING HIGH SCHOOL

FORM "A"
TO BE COMPLETED BY APPLICANT

APPLICANT'S NAME _____

HOME ADDRESS _____

EMAIL ADDRESS _____

HOME PHONE # (____) _____ CELL PHONE # (____) _____

CURRENT HIGH SCHOOL YOU ARE ATTENDING _____

SCHOOL YOU ARE PLANNING TO ATTEND _____

COURSE OF STUDY _____

PLEASE LIST BELOW, THE NAMES OF THE ORGANIZATIONS AT WHICH YOU HAVE SERVED IN A VOLUNTEER CAPACITY AND TO WHICH YOU HAVE GIVEN A COPY OF FORM "B" FOR COMPLETION.

NAME OF ORGANIZATION	DATES OF SERVICE	CONTACT PERSON/TITLE	PHONE NUMBER

(PLEASE LIST ANY OTHER COMMUNITY ORGANIZATIONS ON BACK IF NEEDED)

****IN ADDITION:**

ON A SEPARATE SHEET, PLEASE PROVIDE THE COMMITTEE WITH A DESCRIPTION OF YOUR VOLUNTEER ACTIVITIES. YOU MAY BE CALLED IN TO MEET WITH THE SCHOLARSHIP COMMITTEE.