

The Phil Falcone Memorial Scholarship

This scholarship is in memory of Phil Falcone who died in 2008. Phil was involved for many years with youth programs in our area, including the Drexel Hill Raiders. He served as the President of the Drexel Hill Raiders Organization for 6 years and did a wonderful job making sure the youth in our area had a good organization to be involved in.

This is a one time scholarship in the amount of \$500.00

The following are requirements for this scholarship:

- Submit the application attached.
- Applicant must be graduating from High School and attending college as a full time student.
- All applicants must have participated in the Drexel Hill Raiders Organization for at least 4 years in one or more of the sports we offer: (Football, cheerleading, wrestling, basketball, lacrosse)
- Applicant must be in good academic standings. (proof of good grades required)
- Submit an essay on the following topic:
Someone who has been a positive role model for you; who has made a big difference in your life as you grew up and why.
- Two letters of Recommendation is required. They can be from a teacher, coach or neighbor but NOT from a family member.

Deadline for this scholarship is April 30
phone no later than May 15..

You will be notified by

Visit: www.drexelhillraiders.com to print out your application.

Please type of print your answers. If application is illegible it will be returned to you.		

Last Name:	First Name	
Mailing Address:		
Street _____		
City:	State	Zip
Daytime Telephone Number:		
Date of Birth: Month _____ Day _____ Year _____		
Social Security Number: _____		
I will be attending the following school in the Fall of 20 _____		

(Proof of acceptance or current student enrollment from the above school is required)		
Grade Point Average (GPA): _____ (Attach proof of GPA. Your most recent official school transcript required)		
Name & address of parent(s) or legal guardian(s). Use reverse side of application if needed.		
Name(s) _____		
Street: _____ City _____		
State: _____ Zip _____		
Home phone of parents or legal guardians: _____		

