# *Amici Club*
# *Naperville Area*
# *Italian American Club*
# *The Mary & Wayne Piccin Memorial Scholarship*
# *2026 Application*

To qualify, applicant must be a current high school senior with some Italian ethnicity, attending an accredited Naperville area high school (or a student out of the area who is related to an Amici Club member) with a minimum 3.25 grade point average on a 4.0 scale, who has applied for admission to an accredited two or four year degree granting academic or vocational school and who has completed all scholarship application requirements.

NOTE: AWARD DECISION WILL BE HEAVILY BASED ON THE REQUIRED ESSAY.

**Personal Essay** - Essay must be typed and double spaced and must address the following topic:

**How does the unique characteristic of your Italian heritage benefit you in attaining your educational and life goals?**

Essay will be judged based on quality of writing, clarity of expression and creativity of the author.

**Instructions:** Complete all information requested below. Print legibly or type your answers. Please print or type any additional information that does not fit in the space provided on separate numbered sheet(s) that correspond to questions on this form. Essay must be typed and double spaced. Organinze all materials in the order noted on page 4 of this application. Please follow directions carefully as entries not in compliance will be eliminated. Completed application and all materials must be postmarked no later than April 15th, 2026. Decisions of the Amici Club Scholarship Committee are final.

## 2026

Applicant's Name _____

Street Address _____

City, State & Zip _____

Phone Number _____

Student's Place and Date of Birth _____

Student's Email Address _____

High School Currently Attending, Community _____

Describe your Italian ancestry

_____

_____

_____

_____

_____

Name, in order of preference, institutions where you have applied for admission.

1. _____

2. _____

3. _____

(Please list other schools, if any, on a separate sheet)

Biographical Information

Father or Guardian's Full Name _____

Address, if different than applicant's residence_____

City, State and Zip _____

Home or Cell Phone Number (please indicate "H" or "C") _____

Italian Ancestry, if applicable _____

Mother or Guardian's Full Name _____

Address, if different than applicant's residence _____

City, State and Zip _____

Home or Cell Phone Number (please indicate "H" or "C") _____

Italian Ancestry, if applicable _____

Educational Background and Goals

1. How did you hear about this scholarship?

_____

_____

2. Describe your career objective or goals.

_____

_____

_____

3. List your intended major or area of study and explain why you feel it will help you make a difference through your educational journey and the professional career to follow.

_____

_____

_____

4. List and briefly describe honors, awards, and recognition earned in and outside of school.

_____

_____

_____

5. List and briefly describe all extracurricular activities you have been involved in through school and the greater community.

_____

_____

_____

6. Of the above, describe any volunteer work associated with church or other community organization.

_____

_____

7. List work experience, if any.

_____

_____

8. What are your reasons for applying for this scholarship?

_____

_____

_____

Applicant must submit this signed application along with original, personal written essay, two SEALED letters of recommendation, and a current SEALED official HS transcript. We suggest that the letters be written by any of the following: a principal, counselor, teacher or other administrator familiar with the student who would be likely to provide a positive assessment of the student's personal traits, character, uniqueness, initiative, academic and personal potential, accomplishments and backround.

Please check all to make sure to certify your compliance with all scholarship criteria listed below.

1. I have attached two sealed letters of recommendation, complete with affiliation to applicant and contact information from:

Name, Title, Phone # and Email Address of 1st person submitting letter of recommendation

_____

_____

Name, Title, Phone # and Email Address of 2nd person submitting letter of recommendation

_____

_____

2. I have attached an original personal essay written by me.

3. I have included my most recent official sealed high school transcript.

4. I, the applicant, certify that all the above information is true and correct.

Print Applicant's Full Name _____

Applicant's Signature _____Date Signed _____

Please submit this application, any additional sheets used to complete the answers, plus other materials assembled in the order stated above to the address below. Completed entries must be postmarked on or before April 15th, 2026. Incomplete applications and/or late submissions will not be considered. Completed application materials must be addressed to:

Amici Club Scholarship Chair
PO Box 6
Warrenville, IL 60555

Thank you for your Amici Club Scholarship Application