

Charlie Wolff Memorial Award



Presented by: Ken-Ton Friends of Youth Foundation, Inc

Due No Later Than January 31, 2018

The Charlie Wolff Memorial Award is given to a young person from the Ken-Ton area who will graduate or acquire their GED by June 2018. and who has overcome an extreme obstacle in their life and has a drive to succeed in life. When completing the attached questions please be specific and use examples. Your words can make the difference!

*Friends of Youth Foundation, Inc. - Officers
President, Robert A. Fiordaliso
Secretary, Phyllis Depronio
Treasurer, Robert Wunsch
Dennis Gallagher- Chairman Awards Committee*

Purpose: The purpose of this educational grant is to give financial assistance to individuals who are continuing their education. This educational award may be used for tuition, fees, supplies needed to continue your education, uniforms, etc.

Awards: The amount of the award will be up to \$1000.00 based on the committee's recommendation.

Criteria that the committee will consider include:

- Nominee should be a Senior or in their last year of school at the time of applying
- Community Service involvement/ ability to assist others
- Plans for continued education or training
- Commitment to success
- Letter of recommendation from a current instructor
- Must be a Ken-Ton resident

Apply: To apply for the Charlie Wolff Memorial Award:

- Fill out the application on next page
- Attach a letter of recommendation from a current instructor

Deadline: All material must be received by January 31, 2018.
Send the completed attached form and letter of recommendation to:

Ken-Ton Friends of Youth

Recommendation Form
Charlie Wolff
Memorial Award

P.O.



Box 607
Kenmore, NY 14217

(Please Print or Type)

Nominee's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Date of Birth: _____

School: _____

Year/Grade: _____

Teacher or Counselor recommending you for this award:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

School Phone #: _____

Parent(s)/ Guardian(s) Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

(Please Print or Type)

Charlie Wolff Memorial Award

Please complete the attached "Recommendation Form"

Please attach a letter from a teacher or counselor who will recommend you for the Charlie Wolff Memorial Award.

Please answer the following questions on a separate piece of paper. Please be specific and use examples your words can make the difference.

Please put your name at the top of each separate sheet of page you use:

1. What are your educational/vocational goals & plans for the future?
2. What is the name and address of the school you plan on attending?
3. Why should you be considered for the Charlie Wolff Memorial Award?
4. Explain what community service you have completed or how you have been helpful to others?
5. Please explain your circumstances on why you should be selected for this award.

Please return the completed original form and four copies to:

**Ken-Ton Friends of Youth Foundation, Inc.
P.O. Box 607
Kenmore, N.Y. 14217**

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For more information on the Ken-Ton Friends of Youth Foundation, Inc.
Please visit our web site at: **www.kentonfriendsofyouth.org**