



11845 West Olympic Blvd., Suite 900
Los Angeles, California 90064
Telephone: (310) 739-9350
Fax: (818) 638-7857
E-mail: info@fondazione-italia.org
www.fondazione-italia.org

Scholarship Application 2015-2016

Fondazione Italia's mission is to promote Italian language and culture to students from all backgrounds and income levels. This scholarship opportunity is intended to help provide language education to students who otherwise would not have the opportunity. Our scholarships are available to children, ages 1 – 12 years old, and are subject to availability of funds. **Only one scholarship per family per year can be awarded.**

Application Instructions:

As funds are limited, we recommend that you apply before the start of the next session. To find the center nearest you and their session start dates, please visit www.fondazione-italia.org. The scholarship can only be applied towards tuition costs and does not include material fees or instructional books.

| APPLICANT INFORMATION (please print) | | | |
|--|--|---|---|
| Student Name: | | Date of Birth: | |
| Parents/Guardian Name (if student is under 18 years old): | | | |
| Mailing Address: | | | |
| City: | State: | Zip: | |
| Cell Phone: | Email: | | |
| ADDITIONAL INFORMATION (please print) | | | |
| Where would you like to enroll? | | | |
| <input type="checkbox"/> Burbank | <input type="checkbox"/> Hermosa Beach | <input type="checkbox"/> Lake Forest | <input type="checkbox"/> West Los Angeles |
| Please indicate the class you would like you or your child to attend: | | | |
| <input type="checkbox"/> Primi Passi | <input type="checkbox"/> Piccoli Amici | <input type="checkbox"/> Parlo Italiano | <input type="checkbox"/> Pre-AP |
| Amount of scholarship requested*: | | | |
| \$ _____ | | | |
| <i>* The amount requested cannot exceed class tuition for one session and if granted, will be applied directly towards your tuition.</i> | | | |



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Letter (please attach second page if necessary)

Please submit a letter that address the following: financial need, the inspiration and purpose behind the student's motivation to attend Italian language classes and any other background that helps convey the circumstances relating to this request.

Signature: _____ Date: _____

Email or fax the completed application at least two weeks before the start of the next session to Hilary Stern at hstern@fondazione-italia.org or fax to 818-638-7857

Scholarships are made available thanks to the generosity of our supporter.

Grazie!