Polonia of Long Island, Inc.

SCHOLARSHIP APPLICATION 2026

1. Applicant's Name _____

2. Address _____

3. Telephone # _____ e-mail address _____

4. Place and Date of Birth _____

5. Explain Your Polish Heritage _____

6. Family Background;

   (a) Student Marital Status: Single ☐ Married ☐

   - Spouse's Name _____
   - Occupation _____
   - Place of Employment _____

   (b) Father's Name _____ Living Y ☐ N ☐

   - Occupation _____
   - Place of Employment _____

   (c) Mother's Maiden Name _____ Living Y ☐ N ☐

   - Occupation _____
   - Place of Employment _____

7. Polonia of Long Island, Inc. - Membership:

   Individual ☐ Family ☐

8. Educational Background;

   (a) Name and address of college you are attending:

   _____

   Level of education at start of a next semester: Sophomore ☐ Junior ☐ Senior ☐

   Other: _____

   Major: _____

   (h) List colleges attended – most recent first:

SCHOLARSHIP APPLICATION 2026

College/Location					
Date From-To					
Major					
Year Graduated					
Degree					

(c) High school - name, location, years attended, year graduated:

_____

(d) Polish supplementary school education – name, location, years attended, graduated:

_____

_____

8. Other family members attending college:

Name	Age	Relationship to the applicant
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. Have you previously applied for a scholarship from Polonia of Long Island, Inc.?

Yes ☐ No ☐ Year Applied _ Received _ Not Received _

I hereby certify that all of the information provided in this application is complete, true and correct to the best of my knowledge.

Applicant's Signature Date _

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