

CSEA LOCAL # 806

SABINA KULAKOWSKI MEMORIAL **SCHOLARSHIP**

APPLICATION DEADLINE: May 2, 2025

- 1. Six Scholarships in the amount of \$500 each will be awarded
- 2. Applicants must be the child/step-child or grandchild of a Cayuga County Local 806 member
- 3. Selection by panel of three non CSEA individuals, will be based on
 - Scholastic ability
 - Ambition and initiative
 - Moral Character
 - Financial need
 - Extra-curricular activities/Community Service

There will be NO discrimination because of race, creed or color, religion.

Applicant must be a graduating High School Senior.

CONTACT THE FOLLOWING PEOPLE FOR APPLICATIONS:

President of Local #806 -or-Tom Gabak tgabak@auburnny.gov lisaboscoutterback@outlook.com (315) 729-4939

Lisa Utterback (315) 224-2536

SABINA KULAKOWSKI MEMORIAL SCHOLARSHIP

CAYUGA LOCAL 806 SCHOLARSHIP APPLICATION

Application Deadline: May 2, 2025

Mail to: CSEA Award Committee c/o Lisa Utterback & Will Jenkins 2687 Rude St
Weedsport, NY 13166
Please print off and mail to this address.

Please complete application (May be handwritten using black or blue pen) (WORD PROCESSING ALSO ALLOWED)

1)	APPLIC	ANT		
Nar	me:			
Δdα	dress:			
7101	ar C55.	Street Name		
		City		
		State	Zip Code	
Pho	one Num	nber: ()	Email Address:	
2)	HIGH S	8		•
	Name:			
	Addres	s:		
	Gradua	ation Date:		
	2b)	Applicant's Numerical Class Rank:		
		Total number of students in graduating	class:	_
		Applicant's Percentage Rank in that clas	s:	_%
	2c)	Applicant's current, cumulative H.S. grad	de level average:	%*
	* If gra	ade average system is other than 100% m	aximum based, indicate	applicants:
	Curron	t cumulative grade average	of nossible maximum h	nase

3) CSEA Membership information: Section 3a MUST be completed in full, all parts, for both parents.

a)	Mother's Name			Father's Name
	Mother's Employer			Father's Employer
	Mother's Job Title			Father's Job Title
	CSEA Member? Yes No		CSEA Member?	Yes No
4)	SPECIAL NEEDS (If you have a special please explain):	need because of e	extenuating circu	mstances not described elsewhere,
5)	Name of College or school applicant	plans on attendin	g:	
	College or school location:			
	Major course of study:	li de la companya de		
	Has applicant been accepted yet?	Yes	No	
6)	OTHER SCHOLARSHIPS:			
	NYS Regents:	(Ann	nual Amount)	•
	Other:		\$	Award Amount (Annual)
	Scholars One-time Award	hip Name	\$	Annual Award
	Other:		\$	_ Award Amount
	One-time Award		\$	Annual Award

7)	Work Experience:			
1	Employer's Name	Job Title	From/To	Salary
2				
3			ų	
4				
8)	School-related activities in whic	h you participated:		
9)	Non-school related activities in	which you participated:		
10)) List any awards you have won ii		d .	
				·
11) Career Goals: Write a short sun	nmary of your career goals:		

h school principal or guidance counselor 50,000-\$59,999 50,000-\$69,999
60,000-\$69,999
70,000-\$79,999
80,000-\$89,999
Over \$90,000
(Applicant)
(CSEA Member)

This scholarship is awarded in memory of Sabina Kulakowski, an employee of the Cayuga County Social Services Department murdered in May 1991.