



CARLO THOMAS CICCHINI  
MEMORIAL SCHOLARSHIP APPLICATION

**DEADLINE FOR APPLICATION:  
March 13, 2019**

**Available to employees of McDonald's restaurants  
which are owned and operated by Guy Cecchini**

**ELIGIBILITY CRITERIA:**

- ☐ Freshman, sophomore, junior, or senior standing
- ☐ Full-time student
- ☐ Employee of McDonald's (or employee's legal dependent)
- ☐ Minimum 2.75 cumulative GPA

**\*Please do not remove cover sheet\***

**WALSH UNIVERSITY**  
**CARLO THOMAS CICCHINI MEMORIAL SCHOLARSHIP**

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**PERSONAL INFORMATION**

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Name \_\_\_\_\_

Student ID \_\_\_\_\_ Email: \_\_\_\_\_

Home Address \_\_\_\_\_  
STREET CITY STATE ZIP

Do you live on campus? ☐ Yes ☐ No

Phone Number \_\_\_\_\_

Name of McDonald's employee \_\_\_\_\_ Years employed by McDonald's \_\_\_\_\_

Store Location \_\_\_\_\_ Relationship to application (if other than employee) \_\_\_\_\_

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**COLLEGE INFORMATION**

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Current Class Standing: ☐ Senior ☐ Junior ☐ Sophomore ☐ Freshman ☐ High School Senior

Degree \_\_\_\_\_ Program \_\_\_\_\_ Major \_\_\_\_\_

Cumulative Grade Point Average \_\_\_\_\_ Fall Semester Grade Point Average \_\_\_\_\_

I will complete graduation requirements by \_\_\_\_\_

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**EXTRA-CURRICULAR ACTIVITIES**

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Please list activities and organizations in which you have participated at Walsh (or, high school activities incoming freshman):

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List all non-college related activities: \_\_\_\_\_

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If selected for this scholarship, you have my permission to send a press release to local papers acknowledging my award. The local paper for my community is \_\_\_\_\_ Your signature: \_\_\_\_\_

*I agree that the information provided is true and I agree to allow the Scholarship Committee to verify any or all information with the appropriate campus offices.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

***Please return to Carmela Bendetta, Scholarship Coordinator***

Walsh University, 2020 East Maple Street, North Canton, OH 44720-3336 • Email: [cbendetta@walsh.edu](mailto:cbendetta@walsh.edu)

Questions: 330-490-7596