Sean P. McCullough Memorial Scholarship Fund Deadline: May 20th

Name of student		Gender: M F
Street	Town	State: NY Zip
Telephone	E-mail Address	
Name of the High School:		
Date of Graduation/Awards Night	:	
Name of College student plans to	attend:	
How many years has this student	been on the track team?	
Please provide one example dem	onstrating the student's dedication to the	e sport:
Please provide one example dem	onstrating the student's strong team lead	dership:
Please provide student's GPA and	or class rank as demonstration of the ac	cademic strength:
		and out?
List of up to 5 volunteer/school/co		
		Date
Address at school:		
Telephone:	E-Mail:	