

Joseph F. Salino Memorial Scholarship Submission

Note: in order for an application to be reviewed, all of the following items must be submitted to the Association Administrator at headquarters before March 15. **PREVIOUS RECIPIENTS ARE NOT ELIGIBLE TO REAPPLY. THIS IS A ONE-TIME AWARD.**

1. Properly completed scholarship application, and
2. Whichever pertains:
 - A. Copy of high school grade transcript along with copy of acceptance letter from college/university/school you are planning to attend and notarized or verified copy of SAT/ACT test results or
 - B. Copy of most recent post-secondary grade transcript including cumulative GPA
3. A letter written by applicant containing the following;
 - A. Field you plan to major in/are currently majoring in
 - B. Your plans for the future
 - C. A list of activities - school, extracurricular and community
 - D. Awards received
4. Letter of recommendation from High School Principal, Assistant Principal or Guidance Counselor from school you are presently attending or school from which you graduated.
5. Completed "Qualifications for Scholarship Recipient" section below

Qualifications for Scholarship Recipients

Note: In order for an application to be considered, at least one item in each section must be checked.

Section 1

The applicant must be a United States citizen and the sponsor must be a Pennsylvania Certified/Registered Applicator and a family member of:

An owner of a pest control company which has maintained active membership in the PPM A for a minimum of four (4) years and is currently an active member in good standing.

An employee who has worked full time for a minimum of four (4) years for an active member in good standing with the PPMA.

Section 2

"Has been accepted as a full-time student as defined by an accredited 4-year college/university or a full-time student in a 2-year associate degree program leading to an Associate Degree and/or Bachelor's Degree."

"Is currently enrolled in a program as described above."

Section 3

Have at least one of the following:

A. "B" high school grade average or GED equivalent

C. If now attending college, minimum of 2.8 cumulative college GPA

Section 4

The sponsor must be a Pennsylvania certified/registered applicator and/or work in a Pennsylvania branch office.

Section 5

A natural, adopted, legal guardian child, or member of the household of a person who meets the qualifications previously stated, I certify that the above information is true and correct.

Signature _____

Date _____

Joseph F. Salino Memorial Scholarship Application

Date (PPMA) Received _____

Applicant's Full Name: _____

Address: _____ City, State, Zip: _____

Home Phone: _____ Mobile Phone: _____ Social Security No. _____

Date of Birth: _____ Age _____ U.S. Citizen: Yes _____ No _____

High School (s) Attended: _____ Phone: _____

City and State _____

Year of Graduation _____ Rank In Class _____ Total # in Class _____

Grade Point Average: _____ Combined SAT Score (OPTIONAL): _____

College Presently Attending: _____

City and State: _____ Year of Graduation _____

Applicant's Employer _____

Address: _____ City, State, Zip: _____

Phone: _____ Immediate Supervisor _____

Previous pest management industry employment of applicant (if applicable):

Company: _____

Address: _____ City, State, Zip: _____

From: _____ To: _____ From: _____ To: _____

Name of parent/guardian in Pest Management: _____ Phone: _____

Parent's Employer: _____ Phone: _____

Address: _____

Number of years with present employer: _____ Position _____

Remarks: Use this space, and additional pages as needed, to explain/expand upon any earlier items.

Applicant's Signature _____ Phone _____

Sponsoring Company: _____ PA Business Lic. # _____

Member in good standing of PPMA for minimum of 4 years Yes No

Licensed PMP's Name (Print) _____

PA Certification # _____

PMP's Signature _____ Date _____

Mail by March 15, 2023 to PAPMA, 300 North Second Street, Suite 1002, Harrisburg, PA 17101