



SAMUEL AND ELIZABETH MANNO AWARD APPLICATION

PLEASE TYPE YOUR ANSWERS OR PRINT CLEARLY

Name of Applicant: _____
(Last) (First) (MI)

Home Address: _____
(Street) (Town/City) (State/Zip)

Home Telephone: (_____) _____ Local Phone: _____

College Address: _____

Banner ID: _____

Total Credit hours earned at Brockport: _____ Institutional GPA: _____
(Minimum: 30) (2.75 Minimum)

Cumulative GPA in Major: _____
(3.0 or higher)

Major or intended major: _____

Career Goals: _____

Attach to this application a 500 word typewritten statement on why you believe you should be considered for the Samuel and Elizabeth Manno Award. Include evidence that you are (1) a student in good standing, (2) good character, (3) one who demonstrates concern for others and (4) commitment to your chosen field of study. Show how this major relates to your career goals and objectives and the contributions you hope to make professionally and as a citizen in your community.

Please attach two (2) letters of recommendation from individuals (other than relatives) who know you personally and who will provide evidence that you are a student who (1) is in good standing, (2) exemplifies good character, (3) demonstrates concern for others, and (4) evidence of commitment to your chosen field of study, academic abilities and other capabilities. Please list below the names of the individuals who will be providing the letters or recommendation.

1. _____
Name Address Telephone

2. _____
Name Address Telephone

ATTACH ESSAY, DEGREE AUDIT REPORT (DARS) AND LETTERS OF RECOMMENDATION TO THE COMPLETED APPLICATION

Submit application, essay, Degree Audit Report (DARS) and letters of recommendation to the Office of Alumni Relations and Development, 216B Allen Administration Building by **December 11, 2009**. The Brockport Student Awards Committee prior to the Honors and Awards Ceremony will notify applicants of the decision.