CIVIL SERVICE EMPLOYEES ASSOCIATION SARATOGA COUNTY EDUCATIONAL LOCAL 864 Class of 2017 HIGH SCHOOL GRADUATION AWARD

Applicant's name:		Phone No.:
Address:		
		Graduation date:
Do you plan to further your education	? Two years	Four Years
Name of school or college you plan to	o attend:	
Have you been accepted?		
(You may use	e separate paper if more space	is needed.)
High School Activities (list activity		r attach a resume):
Leadership Positions (in or outside	e of school):	
Awards received (in or out of school	ol):	
Non-School Activities:		
Work Experience:		
Employer's Name	Job Title	Dates (from/to)

Career Goals (please write a short summary):		
Extenuating circumstances, special nedescribe:	eeds something we should know about you. Please	
Essay: In 200 words or more, please s	share how someone has influenced your life in a positive	
Parent Employment Information (mus	t be completed in full):	
Mother's name	Father's name	
Employer	Employer	
Job title	Job title	
CSEA Member?	CSEA Member?	
Unit Name and Number:	Unit Name and Number:	
Applicant's Signature	 Date	

Mail application, official transcript, and test scores to:

Donna Snyder CSEA Local 864 CSEA Award Committee 30 Cedarcrest Drive Saratoga Springs, NY 12866