



## George J. Siganos Scholarship Certification

### Applicant

I hereby certify that all of the information included in this application is true and accurate to the best of my knowledge.

Date: \_\_\_\_\_ Name: \_\_\_\_\_

### Parent/Guardian

Date: \_\_\_\_\_ Name: \_\_\_\_\_

### High School Principal/Counselor Endorsement:

In regard to the foregoing application of \_\_\_\_\_

I certify that the following information is correct:

Class Size \_\_\_\_\_ Class Rank \_\_\_\_\_ Grade Point Average \_\_\_\_\_

Name: \_\_\_\_\_ Title \_\_\_\_\_  
(please print)

Signature: \_\_\_\_\_