

# **Anthony T. Olive Scholarship**

## **Award Guidelines**

Who May Apply: Graduating Seniors from public high schools in Maryland Counties of Worcester, Wicomico, or Somerset, who have been accepted as a full time student at an accredited four-year college or university, or accredited two-year institution of higher learning.

Considerations: Applicants must have the first name of Anthony, Tony, or Antoinette

Nature of Award: Award amount varies

How to Apply: Applications are available at [www.cfes.org](http://www.cfes.org) Completed applications must be submitted to the Scholarship Advisory Committee. (Address indicated on Scholarship Application Form) by no later than April 1<sup>st</sup> to be considered for a scholarship award, only when the following have been submitted:

1. A completed scholarship application.
2. Most recent official transcript of grades.

**ANTHONY T. OLIVE  
SCHOLARSHIP APPLICATION**

**Student Name** \_\_\_\_\_  
Last First M.I.

**Permanent Address** \_\_\_\_\_  
Street  
City State Zip

**Telephone** ( ) \_\_\_\_\_ **Social Security Number** \_\_\_\_\_

**E-mail address** \_\_\_\_\_

**High School** \_\_\_\_\_ **Graduation Date** \_\_\_\_\_  
Month/Year

\_\_\_\_\_ ( ) \_\_\_\_\_  
Address Telephone

**College or University for which aid is requested** \_\_\_\_\_

\_\_\_\_\_ ( ) \_\_\_\_\_  
Address Telephone

**Entrance Date** \_\_\_\_\_

**Required Attachments:**

**Copy of official high school transcript of grades.**

**Mail Application To:**

**Anthony T. Olive Scholarship Selection Committee  
c/o Mr. James R. Bergey Jr., CPA  
Bergey & Company, PA  
616 William St  
Berlin, MD 21811-1224**

**APPLICATION DEADLINE: April 1<sup>st</sup>**

I certify that I am a legal resident of \_\_\_\_\_ County, State of Maryland and that all information on this form is true and complete to the best of my knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date