

THE JOSEPH S. FLESZAR MEMORIAL SCHOLARSHIP

GUIDELINES AND APPLICATION FORM

GUIDELINES

Please use the space provided to express why you think you would be deserving of The Joseph S. Fleszar Memorial Scholarship.

By signing below I hereby waive my rights to privacy insofar as I authorize The Joseph S. Fleszar Scholarship Selection Committee to request a copy of my college transcript from the Cayuga

Signature

Date

Applications and any supporting documents may be sent to: