



# Levittown Soccer Club

## LUIGI PELINI SCHOLARSHIP APPLICATION

### Part I - Personal Information

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

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Part II - School Information

#### HIGH SCHOOL INFORMATION

#### COLLEGE / TRADE SCHOOL INFORMATION

School Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

Counselor Name: \_\_\_\_\_

School Name: \_\_\_\_\_

City, State: \_\_\_\_\_

Adm. Semester: \_\_\_\_\_

### Part III - Soccer Experience Information

**Levittown  
Soccer Club**  
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**Travel  
Experience**

Level (U-??)	Year		Coach	Travel Team Name
	Fall	Spring		

**Other  
Soccer Club**  
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**Travel  
Experience**

Level (U-??)	Year		Coach	Travel Club or School Name
	Fall	Spring		



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## Part IV - Community Service & Extra-curricular Activities

Y or N  
 Have you attached a narrative description or resume of community service and extra-curricular activities in which you have participated?

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## Part V - Soccer Essay

Y or N  
 Have you attached the one page essay on "How has playing youth soccer helped my personal development?"

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## Part VI - Letter of Recommendation

Y or N  
 Have you attached a letter of recommendation from a school, religious or community service organization?

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## Signature and Date Submitted

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

Signature: \_\_\_\_\_ Date of Submission: \_\_\_\_\_

**Note: Please contact LSC Scholarship Chairman Jim San Filippo at (516-735-0710) with any questions.**  
*All decisions of the Levittown Soccer Club Scholarship Committee are final.*

**Mail all forms and attachments to:**  
**Levittown Soccer Club**  
**c/o Jim San Filippo**  
**89 Silver Lane**  
**Levittown, NY 11756**  
**Attention: Scholarship**