

Seattle Perugia Sister City Association

Full			Date	е
Name:	Last	First	Nickn ame	:
Address:	Street Address			Apartment/Unit #
	City		State	ZIP Code
Phone:		Email		
		et be a member in good standing prior to submitting an ap riew "Applicant Criteria and Proce before submitting this ap	pplication. ess" on the SPSCA w	•
are you i				
if so, who study and did you d	eviously and ere did you d which level complete? or beginner, iate,			
List your i experience related org and/or act Seattle, Ita	nterest in, and e with, Italian- ganizations ivities in			

2025 Scholarship Application

prior travel experience in Italy.	
Have you attended and/or volunteered at any SPSCA events? If yes, please provide details.	
If awarded a scholarship, how would you meet your commitment of one year's volunteer support to SPSCA following your month of study?	
Do you have any specific skills, experience or interests that you feel would be especially beneficial to our organization?	
How did you hear about the scholarship program?	
What is your current occupation or employment status?	
Anything further you would like to add?	

Please complete, scan and email this application to scholarshipcomm@seattle-perugia.org
Only emailed applications will be accepted.

Applications must be received by March 31, 2025.

For more information on Seattle Perugia Sister City Association, visit our website at: www.seattle-perugia.org.