



MEMORIAL AWARDS

In memory of EILEEN KLOTZ – Schuylkill Haven High School
In memory of PAUL J. FRANKS– Shenandoah Valley High School
In memory of MARGARET TRUSKY – Tamaqua Area High School
In memory of INA C. CALVIN and/or PATRICIA FEDORICK – Pottsville Area High School
In memory of ALICIA RATKIEWICZ – North Schuylkill High School
CHILD DEVELOPMENT, INC. Memorial Award – All Other School Districts

\$100.00 award to a former student of Child Development who is graduating from your high school

To be eligible for this award the following criteria must be met:

1. The graduating Senior must have attended Child Development Inc.
2. The graduating Senior is continuing their formal education or entering the military service.
3. The graduating Senior must complete their portion of this application with the required signatures and submit it to their guidance counselor on or before **March 19, 2022.**
4. The Guidance Counselor must complete their section of this application, sign it and include a copy of student's most recent transcripts.
5. The completed application and transcripts must be received or **postmarked by April 1, 2022** to:

**Child Development Inc. Memorial Awards
ATTENTION: Executive Director
2880 Pottsville Minersville Highway, Suite 210
Minersville, PA 17954**

STUDENT NAME: _____

ADDRESS: _____

TELEPHONE NO: _____ (Cell) _____ (Other)

PARENT'S NAME: _____

2880 Pottsville-Minersville Highway, Suite 210 • Minersville, PA 17954

Voice: (570) 544-8959 • (800) 433-3370 • Fax: (570) 544-6915

www.childdevelop.org

Proud member of the Schuylkill United Way

ESTIMATED DATES OF ATTENDANCE AT CHILD DEVELOPMENT

FROM: _____ TO: _____

NAME OF CENTER ATTENDED: _____

NAME OF CENTER OR HOME BASE TEACHER: _____

GUIDANCE COUNSELOR RECOMMENDATION: _____

~ Acceptance of award constitutes permission to announce publicly names of recipients. ~
~ Please include a senior photo with this application for possible publication. ~

STUDENT SIGNATURE: _____

PARENT/GUARDIAN SIGNATURE: _____

GUIDANCE COUNSELOR SIGNATURE: _____

SCHOOL DISTRICT: _____

DATE: _____