

**NORFOLK STATE UNIVERSITY  
NATIONAL ALUMNI ASSOCIATION, Inc.  
WASHINGTON, D.C. CHAPTER**

**Application for the  
ELLEN P. IMBRIGATO SCHOLARSHIP**

Applicant's Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Cellular Telephone# \_\_\_\_\_

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

Name of High School: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Principal: \_\_\_\_\_ Phone: \_\_\_\_\_

Guidance Counselor: \_\_\_\_\_ Phone: \_\_\_\_\_

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

*I give the Norfolk State University Inc. Washington, D.C. Alumni Chapter authority to verify all information provided on this application.*

Signature: \_\_\_\_\_ / \_\_\_\_\_  
(Student) (Date)

Signature: \_\_\_\_\_ / \_\_\_\_\_  
(Parent or Guardian) (Date)