

**Miss Polonia 2025**  
**Application**

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

Address: Street \_\_\_\_\_ City \_\_\_\_\_, NY Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**School:** \_\_\_\_\_ **Class of** \_\_\_\_\_

Briefly explain your claim to Polish descent. Please be specific.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Education:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Career Goals:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personal Goals:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Hobbies/ Special Interests:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

School, Volunteer or Community Organization Activities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you willing to participate in this year's Polish Festival, scheduled for June 20, 21, and 22 2025 at Clinton Square, Syracuse? If yes, please check which days:

Friday, June 20    Saturday, June 21    Sunday, June 22

Application with photograph must be submitted no later than: **April 15, 2025** to:

Polish Scholarship Fund, Inc.  
Miss Polonia Selection Committee  
P.O. Box 6032  
Syracuse, NY 13217-9211