

Hamshire-Fannett EDUCATION FOUNDATION

Scholarship Application

2016-2017

Hamshire-Fannett Education Foundation Scholarships are given each year to graduating seniors. The recipients are chosen based on certain criteria and guidelines. The number of scholarships given is dependent upon the amount of donations received each year.

1. Name of student: _____ Phone # _____

2. Name and address of Parents/Guardian: _____

3. List any significant honors/awards you received while in high school (If attaching a resume, list the most significant honors/awards to you.):

4. List any organizations you have been involved in, as well as any offices you held while in high school:

5. List any other activities (school or community) you have participated in while in high school:

6. List any volunteer AND employment opportunities you have participated in while in high school:

7. Educational plans: (choose one) Four year academic _____ **OR** Vocational, business, or technical _____

College/Institution you plan to attend: _____

Have you applied? _____ been accepted? _____ Intended area of study: _____

8. List all of the people now living in your home. Include non-family members who are dependent on your family support. Indicate if any household members are currently in college.

NAME	AGE	RELATIONSHIP	IN COLLEGE?

*If there are more, check here _____, and continue this list on the last page of this form.

Father's occupation & employer: _____

Mother's occupation & employer: _____

Family income range: __under \$25,000 __\$25,000-35,000 __\$35,000-45,000 __\$45,000-55,000

__\$55,000-65,000 __\$65,000-75,000 __\$75,000-85,000 __\$85,000-95,000 __over \$95,000

Estimated Family Contribution (EFC) from FAFSA _____ (Include copy of the report)

9. List any scholarships applied for & their status at this time; either Received (R) ; Pending (P) or Denied (D): (continue on the last page if needed)

10. TYPE a brief summary (no more than two pages, 12 pt. font, double-spaced) of your life goals and plans after high school. Include any circumstances within your family that might have a bearing on your need for scholarship assistance. Attach the summary to this form.

Please attach a picture of yourself.

Signature of Student Date

Counselor will complete: Rank _____ of _____; GPA _____; SAT/ACT _____

SUBMISSION OF THIS APPLICATION PERMITS THE RELEASE OF THE INFORMATION ON THIS FORM TO THE EDUCATION FOUNDATION AS THEY CONSIDER YOU FOR A SCHOLARSHIP.

Deadline: 3:30pm, Friday, March 31st **NO EXCEPTIONS!!**

