## MANCHESTER ESSEX REGIONAL SCHOOL DISTRICT SCHOLARSHIP APPLICATION

## **Class of 2015**

ELIGIBILITY: Acceptance to a four-year or two-year college, technical institute, post graduate school or other educational program beyond high school by May 1st and a prospective graduate of Manchester Essex Regional High School on June 5, 2015.

## **INSTRUCTIONS:**

• Please complete this scholarship application and attach a copy of your financial aid award letter (if applicable). Submit 20 stapled copies of all materials to the Guidance Department no later than Friday, April 3, 2015.

1.	Student			
		Last name	First name	
2.	Address			
		Street	City/Town	
3.	Which coll	ege or school will you be attendi	ing? (If not known, list top two ch	noices.)
4.	What cours	se of study or major do you plan	to pursue?	
5.	High school	ol GPA (MERHS scale)		
6. List any Academic Distinctions or Honors you have received since the 9th grade.				
7. ]	List your pri	ncipal extracurricular, volunteer	, and work activities in order of in	nportance to you.
Ac	tivity/Positi	on/Leadership		Years Participation
				9 10 11 12

8.	8. Briefly describe how your education has influenced your future goals.				
PERSONAL DATA					
1.	Name of Parent(s)/Guardians(s)				
2.	Occupation(s)				
3.	Applicant lives with:  Stepfather  Mother  Stepmother  Other				
Parents separated or divorced? Mother/Father deceased?					
4. Number of other children currently enrolled in college:					
Name(s) of School(s)/College(s)  Receiving financial aid? (yes/no)					
5.	Have you applied for financial aid at your intended college/school?  Yes  No				
6.	Estimated cost of your college/school: room, board, tuition, books, transportation and other expenses				
υ.	for the 2015-2016 academic year. \$				
Remember to attach a copy of your college financial aid					
	award letter if available.				

## A Parent or Guardian must complete this section: 7. Please make any comments about your financial status that may help the committee in considering your student's application. Please be as clear and complete as possible. Feel free to attach a more detailed letter. **Parent/Guardian Certification:** I/We have checked this form for omissions and errors. To the best of our knowledge the information is

complete and correct. I give permission for this information to be released to all appropriate scholarship

Signature \_\_\_\_\_ Date \_\_\_\_

Relationship to student\_\_\_\_\_

committees.

The Manchester Essex Regional School District does not discriminate in its scholarships, programs, activities or employment practices based on race, color, age, national origin, religion, gender, sexual orientation or disability.