

2016 Agganis Foundation Scholarship Application



NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

E-MAIL _____

PARENT E-MAIL _____

PHONE _____

HIGH SCHOOL _____

COLLEGE YOU PLAN TO ATTEND _____

Academic Information

GRADE POINT AVERAGE _____ CLASS RANK _____ OF _____

SAT SCORES CRITICAL READING _____ MATH _____ WRITING _____

VARSITY SPORT(S) PLAYED _____

APPLICANT MUST INCLUDE EIGHT (8) COPIES OF THE FOLLOWING:

APPLICATION
TRANSCRIPT*

LETTER OF RECOMMENDATION FROM COACH OR TEACHER

RESUME DETAILING:

EXTRACURRICULAR ACTIVITIES

COMMUNITY SERVICE

ATHLETIC ACCOMPLISHMENTS

HONORS OR AWARDS RECEIVED

PLEASE COLLATE APPLICATIONS SO THAT THERE ARE 8 SEPARATE COMPLETED APPLICATIONS. PLEASE DO NOT PUT TRANSCRIPTS IN SEPARATE ENVELOPE.

PLEASE RETURN APPLICATIONS BY *Apr. 27* TO:

AGGANIS FOUNDATION, 85 EXCHANGE ST., SUITE 218, LYNN, MA 01901

FOR MORE INFO, CALL 781-593-7311 OR EMAIL INFO@AGGANISFOUNDATION.COM