

Sarah Dow MacGregor Scholarship
6 Pinnacle Hill Road
New Hampton, NH 03256
APPLICATION FOR SCHOLARSHIP
College Student

Date _____

Please fill out this form completely and accurately. **No consideration can be given to applications not fully completed.** Return your application to the committee on or before May 31, 2021 no later than 3:00 pm. The committee will be meeting on June 1, 2021. Late applications will not be accepted. The information given on this application will be held in strict confidence by the Scholarship Awards Committee. Applicant must have resided in New Hampton for the previous two years.

1. Applicant's full name: _____ Age: _____

2. Physical address: _____

Mailing address if different: _____

Phone number: _____

3. How long have you lived in New Hampton? _____

4. Name of school you now attend: _____

If presently in college, what year will you begin in Sept. 2021?

Sophomore Junior Senior

BE SURE TO ENCLOSE A TRANSCRIPT OF ALL COLLEGE WORK.

Essay

Please include with this packet a written statement explaining your plans for your education and career. If there is any information which will help the committee understand your needs, and which you have not given elsewhere in this application, you may give it in this statement.

Your goals, as expressed in this statement, will represent a major factor in the consideration given to your application by the Scholarship Awards Committee. If this is a reapplication be sure to include any changes in your educational and career plans.

Applicant's Work Experience and Financial Statement

1. List your part or full time gainful employment for the past four years.

Year	Job description	Gross Amount Earned
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2. What savings do you have at the present time? \$ _____

2A. Do you receive Social Security Survivor Benefits? _____ If yes, what are your monthly benefits? _____

3. Do you assist your family financially? If yes, explain: _____

4. Estimate of your educational expenses for next year.

A. Tuition \$ _____ Fees \$ _____

B. Room and board (college or other) \$ _____

C. Books and supplies \$ _____

D. Other supplies (specify) \$ _____

E. Transportation \$ _____

Use
the back of
this page for any
details.

5. How do you expect to meet these expenses? List all anticipated contributions in dollar amounts.

From your family? \$ _____

From your savings? \$ _____

From summer work? \$ _____

From other sources? \$ _____

6. Have you received a Sarah MacGregor Scholarship previously? _____

When? _____

Amount? _____

7. List financial aid and amounts you will receive or expect to receive for the next school year for education. List all scholarship aid for which you have applied.

8. List your brothers and sisters, starting with the eldest and give the age of each.

The statements in this application are true to the best of my knowledge.

Signed _____

Parent or Guardian

Signed _____

Applicant

Date _____

Return the completed application no later than May 31, 2021, by 3:00 PM to:

Sarah Dow MacGregor Scholarship Committee
New Hampton Town Office
6 Pinnacle Hill Road
New Hampton, NH 03246