

TRI-TIOWN ROTARY— HARLAN STONE MEMORIAL SCHOLARSHIP

(Hanover, Norwell and Pembroke)

2024

APPLICATION FORM

Note: Candidates for the scholarship are requested to provide all of the following information. Such information will be treated confidentially and subject to review by the appropriate decision Board. . Scholarship' are granted on the basis of numerous factors, including ability to succeed in the future education or business plans the candidate may have, financial need, and past educational performance. Scholarships are granted to deserving high school students from or residing in the Towns of Hanover, Norwell and Pembroke. The deadline is April 12, 2024. Applications can be dropped off in the Guidance office or mailed to John McCarthy 440 Broadway Hanover, MA 02339 (617-347-0933)

Candidate's Name: ___ ___ ___ ___ ___ ___ ___ ___

Address: ___ ___ ___ ___ ___ ___ ___ ___

 ___ ___ ___ ___ ___ ___ ___ ___

 ___ ___ ___ ___ ___ ___ ___ ___

High School: ___ ___ ___ ___ ___ ___ ___ ___

Date of Anticipated Graduation: ___ ___ ___ ___ ___ ___ ___ ___

Scholastic Aptitude Test: ___ ___ ___ ___ ___ ___

(Score)

(Date taken)

Class Ranking (if known or available): ___ ___ ___ ___ ___ ___

(Rank)

(Class Size)

Grade Point Average (latest available): ___ ___ ___ ___

Extracurricular Activities:

___ ___ ___ ___ ___ ___ ___

(Activity)

(Year)

___ ___ ___ ___ ___ ___ ___

(Activity)

(Year)

___ ___ ___ ___ ___ ___ ___

(Activity)

(Year)

___ ___ ___ ___ ___ ___ ___

(Activity)

(Year)

(USE SEPARATE 8 ½x 11 SHEET IF ADDITIONAL SPACE IS NEEDED)

Employment(while attending high school):

___ ___ ___ ___ ___ ___ ___

(Business/Position)

(Date)

___ ___ ___ ___ ___ ___ ___

(Business/Position)

(Date)

___ ___ ___ ___ ___ ___ ___

(Business/Position)

(Date)

___ ___ ___ ___ ___ ___ ___

(Business/Position)

(Date)

(and annual tuition not including room and board)

_____	_____	_____	_____	_____	_____	_____	_____	(Tuition)	_____
_____	_____	_____	_____	_____	_____	_____	_____	(Tuition)	_____
_____	_____	_____	_____	_____	_____	_____	_____	(Tuition)	_____
_____	_____	_____	_____	_____	_____	_____	_____	(Tuition)	_____

College(s) Accepted:
 (letter of acceptance has been received)

Actual Financial Aid Obtained to Date:
 (Including grants, low interest state and federal loans and scholarships)

_____	_____	_____	_____	_____	_____	_____	_____	(Source)	_____	_____	(Amount)
_____	_____	_____	_____	_____	_____	_____	_____	(Source)	_____	_____	(Amount)
_____	_____	_____	_____	_____	_____	_____	_____	(Source)	_____	_____	(Amount)
_____	_____	_____	_____	_____	_____	_____	_____	(Source)	_____	_____	(Amount)
_____	_____	_____	_____	_____	_____	_____	_____	(Source)	_____	_____	(Amount)

Please use the space provided below to describe the reason(s) why you seek a scholarship from the Tri-Town Rotary Scholarship Fund.

Please use the space provided below to give any additional information about yourself, which you believe, would assist the scholarship committee in making a determination regarding your qualifications.

Please request you guidance office to attach a complete copy of your high school grade record, SAT score sheet, current grades and school performance records to this application.

Date

Candidate's signature

PART 11 — PARENTS / GUARDIANS' INFORMATION SECTION

Note: The parents or legal guardians of the applicant are required to complete and sign the following section of the candidate's application. This information is necessary in order to make a fair and impartial decision regarding apparent needs and abilities of the applicant for potential scholarship funding. All information and data provided will be treated confidentially and shall be subject to review only by the appropriate decision board. Such information will not be released to any other party or source.

Candidate's Name: _____

Address: _____

Parent's/Guardian's Name and Address: _____

Parent(1)'s Occupation: _____

Parent(2)'s Occupation: _____

Number of Dependent Children: _____
Number Ages

(Only those residing at home)
Number of Dependent Children Attending College or Higher Education: _____
Number Where attending

Parent(1)'s Gross Reported Income for (from all 2023 W-2/1099 Misc.) \$ _____

Parent(2)'s Gross Reported Income for (from all 2023 W-2/1099 Misc.) \$ _____

Do you own your home? Yes _____ No _____

Date Home Purchased: _____

Do you own real property other than your home? Yes _____ No _____

Do you rent property to anyone? Yes _____ No _____

Does the applicant student have any trust or savings account dedicated for anticipated college expenses? Yes _____ No _____

Amount of such student trust or account: \$ _____

Is any other person or organization expected to pay any portion of the student's tuition and/or room and board while attending school? Yes _____ No _____

If the answer is yes please list the names and organizations:
