Friendship Memorial Scholarship Fund
P. O. Box 279
Friendship, Maine 04547-0279

APPLICATION

Deadline: MAY 1st

Submit to: Secretary, Friendship Memorial Scholarship Fund, P.O. Box 279, Friendship, ME 04547-0279

Scholarships are awarded to any resident of Friendship who is graduating from the 12th grade and is planning to continue their education. Awards are announced at graduation. The award is for the second semester attendance at any college, university, technical school, or other educational facility beyond the high school level. The award is mailed in December. Preference is given to graduating seniors. Awards may be made for subsequent years of schooling depending on available funds. The same application is used.

Please check one box: **First Application [ ]** **Continuing Education App. [ ]**

Name: _____ Today's Date: _____
(Last) (First) (Middle)

Local Address: _____ P.O. Box _____
(Number and Street)

Telephone #: _____ Name of Parent/Guardian:_____

Please answer all questions as fully as possible so that the scholarship trustees will have a complete and accurate picture of your financial situation and your career/life interests. **All information provided will be held in strict confidence.**

What profession or occupation do you believe you will follow after further education?
_____
_____

Name and location of school you plan to attend: _____

Please tell us if you have worked and the approximate amount you have earned during past summers and/or school years:

Year	Type of Work	Hours/week	Total Earnings
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If you have a job lined up for the coming summer, indicate the type of work and your expected income: _____

Complete both sides of this form

Estimates of available resources and expenditures for the next school year:

Resources:		Expenditures:	
From your savings:	_____	Tuition:	_____
From your family:	_____	Room and Board:	_____
From your job(s)	_____	Fees:	_____
Expected winter job:	_____	Books & Supplies:	_____
Other Scholarships:	_____	Recreation:	_____
Grants:	_____	Clothing:	_____
Loans:	_____	Traveling Expense:	_____
Other Sources (Specify):	_____	Incidentals:	_____
Totals:	**$** _____		**$** _____

If you have further comments or details on your financial situation not covered above, please add them here:

- **Write a brief but inclusive statement on why you want to continue your education. Attach additional sheets if necessary.**

Date: _____ Signature of Applicant: _____

Parent(s): Please indicate the amount you expect to contribute towards your child's further education in the next year: $_____ If you wish to make any further comments, please use this space or attach an additional sheet.

Date: _____ Parent signature: _____