

Joseph and Dorothy Headley Scholarship Fund

The Joseph and Dorothy Headley Scholarship Fund was established to assist deserving young men and women of Vinalhaven, Knox County, Maine, in obtaining education beyond high school either as a part-time or full-time student. Recipients will be any resident continuing his or her education who is both under the age of 35 and has been a resident of Vinalhaven for a period of three (3) years prior to the date of receiving the scholarship. In making selections, the following criteria will be considered: good character, good citizenship, need, and ambition.

Required Information: (do not staple, please)

Please submit the information requested below printed on one side only (not front and back).

1. This completed application form.
2. Two letters of recommendation: one from a current teacher on applicant's character and academic record; one from an employer, past or present, regarding applicant's work habits and general character. The letters must be current (dated after January 1, 2012), on official letterhead, contain your first and last name, and be signed by the writer, who must identify his/her relationship to you (not a family member). E-mail letters are not acceptable.
3. Your most recent official high school or college transcript. A printout from the internet is not acceptable. We prefer that you include your transcript with your application.
4. Personal statement in business letter format stating your reasons for choosing particular school, plans or objectives following graduation, and financial need;
5. Your complete Federal Student Aid Report (SAR), which must include your expected family contribution (EFC) and your family's adjusted gross income (AG). Do not send the FAFSA.

Applicant Data:

Student's Name: _____

Home Mailing Address: _____

Phone: _____ Cell: _____ E-mail: _____

Date of Birth: ____/____/____ Male () Female ()

If parent/guardian will claim you as a dependent this year, please list their name:

Name: _____

Name of current high school or college: _____

Address of high school or college: _____ Grade point average: _____

Student ranks ____ in a class of ____ Most recent SAT scores (optional): Math: _____ Verbal: _____

Post-secondary school for which aid is requested: _____

Upcoming year in school (circle) Undergraduate 1 2 3 4 Graduate 5 6 7 8

Degree anticipated: BA ____ BS ____ MA ____ PhD ____ other _____ Major field of study: _____

School Activities (attach additional sheet if necessary):

Activity	Number of years participating	Special honors, offices
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Community Activities:

Employment History: Provide your employment history for the past two years.

1. Employer: _____ Position: _____
City: _____ State: _____ Zip code: _____ Phone: _____
Employment Dates: from _____ to _____ Avg. hours worked per week _____
2. Employer: _____ Position: _____
City: _____ State: _____ Zip code: _____ Phone: _____
Employment Dates: from _____ to _____ Avg. hours worked per week _____

It is the responsibility of the applicant to ensure that all of the required items are submitted on or before the application deadline. Incomplete applications or those postmarked after May 13 will not be processed. All information received from applicants will be held in confidence.

I certify that I am a legal resident of the State of Maine and that all information on this form is true and complete to the best of my knowledge. I understand that I may be asked to provide proof of information stated on this form, including a copy of my parents' and/or my prior year's U.S. Income Tax return. In addition, I hereby authorize the college I will attend in the 20__-20__ school year to release information on financial aid awarded to me by the college and other sources to the Maine Community Foundation.

Signature of Parent/Guardian: _____

Signature of Applicant: _____

All applications and required information sent separately must be postmarked by May 13 and sent to:

Joseph and Dorothy Headley Scholarship Fund
Maine Community Foundation
245 Main Street
Ellsworth, ME 04605

Family Information

Parents' current marital status: single married separated divorced widowed

Who is responsible for your support? mother father both other _____

Who do you live with? mother father both other _____

Number in household, including parents: _____

Total number of family members who will be attending college during the next academic year: _____

Funds available for your next year of college	
Family Contribution	\$ _____
Personal Savings/Earnings	\$ _____
Scholarships Awarded	\$ _____
Current-year Loans	\$ _____
Other (please explain)	\$ _____
TOTAL	\$ _____
Outstanding student loans: No. _____ Total \$ _____	

Please submit a copy of your college financial aid offer (returning students may submit prior year letter) with this application.

College Budget (Cost of Attendance)

Please complete the cost of attendance at your first choice college below. This information is available in college publications, on the web or from the financial aid office. Please provide current-year numbers.

College Budget for _____ (first choice college)	
Tuition and Fees	\$ _____
Room and Board	\$ _____
Books and Materials	\$ _____
Transportation	\$ _____
Personal and other Expenses	\$ _____
TOTAL COST OF ATTENDANCE	\$ _____
Unusual Expenses (i.e. childcare/medical)	\$ _____

Please explain any special circumstances on a separate sheet.

FINANCIAL INFORMATION RELEASE FORM

**** PLEASE FILL OUT AND MAIL THIS FORM TO YOUR **
COLLEGE OR UNIVERSITY FINANCIAL AID OFFICE,
NOT TO MAINE COMMUNITY FOUNDATION**

ATTENTION: Financial Aid Officer

The student named below is applying to the Maine Community Foundation for a scholarship and requires your assistance in providing need-based information. Please keep this signed statement in the student's file for reference if you receive an inquiry from our Scholarship Coordinator regarding the student's financial aid award.

TO THE SCHOLARSHIP APPLICANT:

I authorize release of financial aid award information to:

**Maine Community Foundation
Scholarship Coordinator
245 Main Street
Ellsworth, ME 04605-1613
Tel: 207-667-9735 or toll free 877-700-6800
Fax: 207-667-0447
E-mail: info@mainecf.org Web: www.mainecf.org**

College/University _____

Name of Student: _____

Address: _____

Phone: _____

Student's Signature: _____

Date: _____

REMINDER: DO NOT mail this form to Maine Community Foundation