

Hattie A. and Fred C. Lynam Scholarship Trust

Bar Harbor Trust Services, Trustee

Graduates of Mt. Desert Island High School who reside on Mt. Desert Island are eligible to apply for this renewable award. There is a preference for students ranked in the top 75% of their high school class whose families reside on Mt. Desert Island at the time of application. Recipients must reapply each year.

All applications and required information sent separately must be postmarked by May 1. Incomplete applications or those postmarked after this date will not be processed.

Name: _____

Post-secondary school for which aid is requested: _____

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

Mailing address on Mt. Desert Island:

Street address or P.O. number _____

City: _____ State: _____ Zip code: _____

Phone: _____ Cell: _____ E-mail: _____

Mount Desert Island High School: _____ Date graduated: _____ Class rank: _____

College (if applicable): _____

College major: _____ College minor: _____

Name of academic advisor: _____ Dept. _____

Phone: _____ E-mail: _____

Your Mailing Address at College (if applicable):

Street address or P.O. number: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Cell: _____ E-mail: _____

Required Information for first-time applicants: (do not staple, please)

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

- Personal statement in business letter format describing your aspirations (500 words)
- A letter of recommendation from a high school guidance counselor or teacher (if you are a current college student, please ask a current professor to provide you with this letter). The letter must be current, 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.
- Your official high school or college fall semester transcript. A printout from the Internet is not acceptable. We prefer that you include your transcript with your application.
- This completed application form.

Required Information for Renewal Applicants: (do not staple, please)

- Personal statement in business letter format describing your college experiences. (500 words)
- Your official college transcript from the fall semester. Preference is for applicants who maintain a "C" average or better. A printout from the Internet is not acceptable. We prefer that you include your transcript with your application.

All applications and required information sent separately must be postmarked by May 1 and sent to:

Bar Harbor Trust Services Scholarships
Maine Community Foundation
245 Main Street, Ellsworth, ME 04605-1613
Tel: (207) 667-9735 or 877-700-6800 (toll free in Maine)

Funds Available for College Expenses

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 \$ _____	

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.

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 1 will not be processed. All information received from applicants will be held in confidence.

I certify that I am a graduate of Mount Desert Island High School. I understand that I may be asked to provide proof of information stated on this form, including a copy of my parents' or my prior year's U.S. Income Tax return. In addition, I hereby authorize the college I will attend in 20__ - 20__ 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: _____

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 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:

**BHTS and Its Agent/Maine Community Foundation
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