

Marion F. and Peter Plouff Scholarship Fund

The Marion F. and Peter Plouff Scholarship Fund provides support to residents of Dexter, Maine, to attend a post-secondary college or community college. Eligible applicants are residents of Dexter who have a record of public service, particularly in their high school years, and for whom a scholarship would make a significant difference in their ability to attend school. Preference will be given to adult learners returning to school to continue their education and students who have previously received a Plouff scholarship.

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.

Renewal Application: yes no

Name: _____ Adult learner: yes no

Street address or P.O. number _____

City: _____ State: _____ Zip code: _____

Phone: _____ Cell: _____ E-mail: _____

Upcoming year in school (circle): Undergraduate 1 2 3 4

College: _____

College major: _____ College minor: _____

Name of academic advisor: _____ Dept. _____

Phone: _____ E-mail: _____

Employment History:

Do you work during the academic year (include work study)?

____ Yes (# of hours _____ location _____) _____ No

Summer Employment History

Position held	Period of Employment	Hours per week
_____	_____ to _____	_____
_____	_____ to _____	_____
_____	_____ to _____	_____

Please share any information concerning your work history you would like the committee to understand:

Please share the highlights of your current (within the past three years) community service.

Volunteer History Organization	Your Role	# of Years

Personal Statement: High school seniors, please tell us about yourself, what you plan to study next year and why. College students, we'd like to know about your academic and extra-curricular experiences this year. This is your opportunity to communicate with the committee. Please submit a thoughtful and thorough response. There is no required minimum word count, but your letter must be typed and should not exceed two pages double-spaced.

Required Information: (do not staple)

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

- This completed application form. All requested information must be provided in order for your application to be considered by the committee.
- 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.
- Typed, personal statement in essay or business letter format.
- A copy of your college financial aid offer (renewal students may submit prior year letter).

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 resident of Dexter, Maine. 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 Applicant: _____

Signature of Parent/Guardian: _____
(if applicable)

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

Plouff Scholarship Fund
Maine Community Foundation
245 Main Street
Ellsworth, ME 04605
Tel: 877-700-6800
Web: info@mainecf.org

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 \$ _____	
Estimated Family Contribution (EFC) from the Federal Student Aid Report of the FAFSA. If you did not submit a FAFSA, you must explain why.	\$ _____

Please submit a copy of your college financial aid offer 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