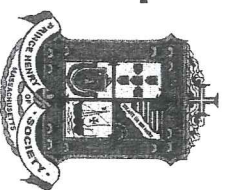


# Prince Henry Society of Mass., Inc.

New Bedford Chapter

PO Box 6726 -- New Bedford Ma 02742



## SCHOLARSHIP APPLICATION

Applications must be filed no later than **April 1st**

- This application must contain accurate and detailed information and must be accompanied by a transcript of Scholastic Record, which should include most recent class rank and S.A.T. scores.
- Eligibility requirements: Any graduating senior of some Portuguese descent seeking an undergraduate or associate degree from an accredited college or university.
- A resident of the Greater New Bedford area.
- Each question or request for information must be answered accurately and completely.
- Please enclose one letter of recommendation from either your clergyman, guidance counselor or teacher of a major subject.

*Failure to do so will result in disqualification.*

### APPLICANT'S INFORMATION (Please print clearly)

Name in full: \_\_\_\_\_ Telephone number: (\_\_\_\_) \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

E-mail address: \_\_\_\_\_ School now attending: \_\_\_\_\_

### FAMILY INFORMATION

Father's/guardian's name: \_\_\_\_\_ Occupation \_\_\_\_\_

Address: \_\_\_\_\_ Annual Salary \_\_\_\_\_

Place of business: \_\_\_\_\_ Other income \_\_\_\_\_

Mother's maiden name: \_\_\_\_\_ Occupation \_\_\_\_\_

Address: \_\_\_\_\_ Annual Salary \_\_\_\_\_

Place of business: \_\_\_\_\_ Other income \_\_\_\_\_

Excluding you and your parents, please complete the information requested for all those living in your household. Including any siblings away at school for whom your parents have responsibility (include grandparents if they live with you).

| Name | Age | School attending | Year in school | cost of |       |  | income or aid rec'd |
|------|-----|------------------|----------------|---------|-------|--|---------------------|
|      |     |                  |                | tuition | board |  |                     |
|      |     |                  |                |         |       |  |                     |
|      |     |                  |                |         |       |  |                     |
|      |     |                  |                |         |       |  |                     |
|      |     |                  |                |         |       |  |                     |
|      |     |                  |                |         |       |  |                     |

If you have a reason for not answering one of the above questions, please explain here:

|  |
|--|
|  |
|  |
|  |

### COLLEGE INFORMATION

First choice \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Total estimated yearly college cost: \_\_\_\_\_

Second choice \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Total estimated yearly college cost: \_\_\_\_\_

How much will your family be contributing to your college costs for your first year? (This should be based on what your family can pay. Not on any designated formula.)

### EMPLOYMENT

| Employer | hourly wage | Average number of hours you work during school year. |
|----------|-------------|--|
|          |             |  |
|          |             |  |
|          |             |  |

### EXTRA CURRICULAR ACTIVITIES (Itemize by school year)

|  |
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