

THE WESTBROOK FOUNDATION
Non Westbrook H.S. Graduating Senior—SCHOLARSHIP APPLICATION

INSTRUCTIONS TO SENIOR HIGH SCHOOL APPLICANTS
SEEKING A WESTBROOK FOUNDATION SCHOLARSHIP

It is our belief that a student pursuing an education should be able to read with comprehension and follow instructions given. Please be advised that everything counts on your application; neatness, legibility, spelling, grammar and providing the information as requested are important points. Applicants who comply will be given consideration. At the same time, we have designed the application to facilitate your providing the information needed by utilizing multiple-choice or brief answers throughout the form. TYPE OR BLOCK PRINT your answers, except for your narrative, which must be typed.

- A. The application packet requires that some information be provided separately, However, it is to be considered as a whole in that when you sign the application you are attesting to the accuracy of all information furnished in connection with your application. Applications which are not signed and notarized will not be considered.
- B. All income information is to be provided on the Financial Aid Form of the College Scholarship Service of the College Board. If you are seeking other financial assistance, you will be required to complete this form by the Financial Aid Office of the school you will be attending.

The Financial Aid Form establishes whether you are emancipated. If your status requires that you complete the "Parents Information" sections of the Financial Aid Form, then, in addition to your signature on our application, your parent or guardian must sign it as well.

- C. All grade information is to be provided on your official transcript(s) from your high school or college(s). All applicants should request that the transcript show your SAT and/or ACT scores. YOU must request that your transcript be sent to us. We would suggest that you make this request as soon as possible in order for your transcript to arrive here to meet reporting deadlines. The mailing of transcripts does not carry a high priority in school offices but they should be able to get to it within the six-week period. For your protection, as you have no control over when your school will mail your transcript, we are requesting that you enclose a copy of your mailing receipt showing the date on which you made the request. If you did not cause the delay, we will wait a few extra days for your school to comply, if necessary.
- D. The Foundation urges you to evaluate the quality of education offered by the school of your choice, its course curriculum, and the electives you choose to make sure you will be able to receive the education you desire.
- E. To continue to be eligible for your scholarship:
 - (1) You must be enrolled as a full-time undergraduate student in a college or university, or as a full-time student in an accredited trade, business, professional, or technical college or school. Normally, full-time for undergraduates is 12 credit hours per semester.
 - (2) You must maintain a grade point average commensurate with the averages required for other scholarship holders by the school attended.
 - (3) You must arrange with your school that an official transcript of your grades be sent to us on a timely basis for the term of your scholarship. The Privacy Act prohibits either the school or the foundation from arranging this directly.
 - (4) You must work to pay part of your education expenses, during the school year or summer vacation
 - (5) If your scholarship is awarded because you have demonstrated financial need, you must continue to have financial need.

This application must be completed and returned, with all requested enclosures, by May 1.
Address: SCHOLARSHIP APPLICATION, THE WESTBROOK FOUNDATION, INC.,
P. O. BOX 528, WESTBROOK, CT 06498.

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F. Your application will be submitted through the Guidance Office of your high school. You must complete the one mailing label enclosed and return it with your application. Type the mailing label, showing the information as outlined below:

- (1) The label should be addressed to you at the address where you will be shortly after January 1, [year]. These labels will be used to send you our check, drawn in the amount of your scholarship. All Foundation checks will be mailed to you upon receipt and approval of original transcript after January 1, [year]. Please address:

Your name
Your address

DEADLINES: The work of the Foundation staff is carefully planned throughout the year to meet all deadlines. In fairness to all, we must ask that you adhere to the deadlines given to you. This application must be completed and returned to your Guidance Office on or before May 1.

G. The application form is designed to accommodate applications for different types of scholarship. **SOME SECTIONS MAY REQUEST INFORMATION WHICH DOES NOT APPLY TO YOU. SOME SECTIONS MAY REQUEST INFORMATION WHICH YOU DO NOT YET KNOW; FOR INSTANCE, MOST FRESHMEN DO NOT KNOW THEIR SCHOOL ADDRESS, AS REQUESTED IN SECTION 4.** In Section 6, we are requesting only the nature of the courses in which you plan to enroll. For instance, you may know you will be taking one history, one English, one marketing, and one political science course. You need not notify us of the specific courses you take unless they are a departure from the nature of the courses shown. To be sure you get the courses you need, we would suggest early registration.

We have provided a copy of the application form, which is both a worksheet and a copy for your records. The original application is to be returned to your Guidance Office together with your narrative statement.

PLEASE NOTE: WITH SOME EXCEPTIONS, FOUNDATION SCHOLARSHIPS ARE NOT AUTOMATICALLY RENEWED FROM YEAR TO YEAR. You will be notified of the type of scholarship awarded to you. You may re-apply annually for further scholarships while you are a full-time undergraduate student. Please send us a typed mailing label, showing "Scholarship Application" and your name and address, to receive an appli-

We have tried to answer your questions regarding applying for a scholarship, to give you specific information concerning continuing eligibility and to give you the schedule we will follow throughout the coming months. We would suggest you keep these instructions with your copy of your application so that you can refer to it throughout the year. If you still have a question after reading this, you may call us at the numbers listed below.

Joanne Marino-Murray, Chairman
The Westbrook Foundation, Inc.
jmmurray@westbrookctfoundation.org
860-399-6122

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PERSONAL INFORMATION

Name: _____		Social Security Number: _____	
Age: _____	Academic Year: _____	Sex: M / F	
Your Permanent Address: _____			
<i>Street Address</i>		<i>Apartment / Unit #</i>	
<i>City / Town</i>		<i>State</i>	<i>Zip Code</i>
Home Phone: _____		Alternate Phone: _____	
Email Address _____			
I am a U.S. Citizen: YES / NO			
If NO, I am a citizen of: _____		Alien Registration No.: _____	
I am a previous Foundation scholarship recipient, from: _____ to _____ Amount Received \$ _____			

ACADEMIC INFORMATION

My declared major: _____			
During the academic year listed above, I will be attending college as a:			
Freshman (1) <input type="checkbox"/>	Sophomore (2) <input type="checkbox"/>	Junior (3) <input type="checkbox"/>	Senior (4) <input type="checkbox"/>
Your School Name (if known) _____			
Your School Address (if known): _____			
<i>Street Address</i>			
<i>City / Town</i>		<i>State</i>	<i>Zip Code</i>
Phone Number: _____			
List schools to which you have applied for admission, by preference. Include full address with ZIP CODE.			
Name of School:		City / State / Zip	
1:			
2:			
3:			
Does the school(s) you have chosen offer a bachelor/graduate degree in your major?			
1: Yes / No		2: Yes / No	
		3: Yes / No	

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FOR ALL APPLICANTS: I understand that I must be a full-time student to receive a Westbrook Foundation Scholarship. I understand that I must notify The Foundation IMMEDIATELY, IN WRITING, if my plans for this academic year vary from the nature of the courses listed below. I understand that a change in my plans may make me ineligible for this scholarship.

FALL SEMESTER/1st QUARTER Nature of Course: _____ Credit Hours: _____	SPRING SEMESTER/2nd QUARTER Nature of Course: _____ Credit Hours: _____
1: _____	1: _____
2: _____	2: _____
3: _____	3: _____
4: _____	4: _____
5: _____	5: _____
Total Credit Hours: _____	Total Credit Hours: _____
Tuition Costs: \$ _____	Tuition Costs: \$ _____
Fees & Books: \$ _____	Fees & Books: \$ _____
Room & Board: \$ _____	Room & Board: \$ _____
TOTAL COST THIS SEMESTER \$ _____	TOTAL COST THIS SEMESTER \$ _____
SUMMER SEMESTER/3rd QUARTER Nature of Course: _____ Credit Hours: _____	Total cost for all semesters for my planned academic year.
1: _____	
2: _____	
3: _____	
4: _____	
5: _____	
Total Credit Hours: _____	
Tuition Costs: \$ _____	\$
Fees & Books: \$ _____	
Room & Board: \$ _____	
TOTAL COST THIS SEMESTER \$ _____	

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I have applied for other scholarship grants, loans or other forms of anticipated financial assistance as follows: (If not yet granted, mark (P) for pending and notify us when you have received response.)

1: \$

2: \$

3: \$

Total Other Assistance \$

SCHOLARSHIP AMOUNT REQUESTED FROM THE WESTBROOK FOUNDATION FOR THIS ACADEMIC YEAR \$

ACADEMIC RECORD

On (date) _____, I requested my Official high school transcript, including ACT & SAT scores, be sent to you by May 1. Copy of receipt is enclosed.

List high school activities in which you have participated stating position or Office attained, if any:

	ACTIVITY	POSITION OR OFFICE ATTAINED
1:		
2:		
3:		
4:		

UPPER CLASS & GRADUATE APPLICANTS:

Other colleges you have attended:

Name of School:	City / State	
Credit Hours Required:	_____	Degree
Credit Hours Earned:	_____	Major
Credit Hours Needed:	_____	Minor
Name of School:	City / State	
Credit Hours Required:	_____	Degree
Credit Hours Earned:	_____	Major
Credit Hours Needed:	_____	Minor

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I am presently working towards a degree in:

Credit Hours Required: _____

Credit Hours Earned: _____

Credit Hours Needed: _____

On (date) _____, I requested that my official college transcript(s) be sent to you by May 15.

Graduate students transcript should include GRE (graduate record exam) scores. Copy of receipt is enclosed.

List college activities in which you have participated, stating position or office attained, if any:

ACTIVITY

POSITION OR OFFICE ATTAINED

1:

2:

3:

4:

EMPLOYMENT HISTORY				
Employment Dates <i>Most Recent First</i>		Employer Name Address	Title / Position	Hours Per. Week
<i>From</i>	<i>To</i>			
<i>From</i>	<i>To</i>			
<i>From</i>	<i>To</i>			

ADDITIONAL INFORMATION

On a separate paper, please provide a brief narrative outlining your interests and the area in which you plan to specialize upon graduation. For those seeking a graduate degree, please outline your reasoning for obtaining this degree in relation to your career goal. Please type your narrative.

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AFFIDAVIT (to be affirmed before a Notary Public)

Under the penalties of perjury, I do solemnly affirm that all information provided pertaining to this application, herein stated or provided separately, is true to the best of my knowledge and belief. Although confidentiality of information provided is expected of The Westbrook Foundation, I hereby authorize The Westbrook Foundation to investigate in any manner which it, in its discretion, deems necessary to determine the accuracy of the statements made in this application and my eligibility for aid. I accept the responsibility for notifying The Westbrook Foundation of any change from that stated in this application in my financial status, nature of course curriculum, change of school or career goal. I agree to make this notification immediately, in writing. I understand and agree that failure to do so may obligate me to return any scholarship granted to me by The Westbrook Foundation.

Signature of Applicant

Signature of Parent or Guardian
Required if Applicant is not Emancipated

Affirmed before me and signed in my presence this
_____ day of _____, 20__.

Affirmed before me and signed in my presence this
_____ day of _____, 20__.

(Signed) _____
Notary Public

(Signed) _____
Notary Public

County State

County State

My Commission Expires:

My Commission Expires:

Month Day Year

Month Day Year