

## Dorcus & Peter Pombay Scholarship

Dorcus and Peter believed that many bright students in Hinsdale don't get a chance to attend post-secondary schools because they cannot afford to do so. This scholarship gives a Hinsdale student a chance to financially achieve their dream of attending college.

This scholarship, which began in 2003, will be given each year to a deserving high school graduate of Hinsdale High School, Hinsdale, New Hampshire. Students receiving this scholarship must have demonstrated in their daily lives a willingness to go out of their way to help others as well as the need of financial aid. This scholarship will be disbursed in equal payments each **consecutive** semester the recipient remains a full time undergraduate student at a post-secondary school. Payments **will not exceed** a time limit of four years and payments **will not exceed** the original amount of the scholarship awarded at graduation. All payments will be disbursed by the New Hampshire Charitable Foundation after proof of semester completion (transcript) is received by them. Any unused portion of this scholarship is forfeited once the recipient is no longer a full time student in an accredited post-secondary school unless extenuating circumstances prevail and an appeal is approved by the New Hampshire Charitable Foundation. (ex: medical)

Return form to Guidance Office by May 7, 2019

Thoroughly complete the following financial aid information:

**Total annual cost of the school** you have chosen to attend (include tuition, room and board, books and any other expenses) \_\_\_\_\_

**Amount of financial aid** you will receive:

- a. Loan (s) \_\_\_\_\_
- b. Grant (s) \_\_\_\_\_
- c. College Work Study \_\_\_\_\_
- d. Scholarships offered at college or university \_\_\_\_\_

e. **529 college saving plan** or other monies saved  Yes  No

To be filled out by parent(s), based on latest federal income tax information:

Adjusted gross income \_\_\_\_\_  
**Line 37 for 1040 and Line 21 for 1040A**

Number of people living in your household \_\_\_\_\_ Adults \_\_\_\_\_ Students

Will you have a job at college  yes  no

Total number of family members that will be attending college \_\_\_\_\_

**Please include with your application:** Please us Check List

1.  Three letters of recommendation, one of which must be from a member of the faculty of HHS.
2.  Your letter of acceptance to the college along with Financial Aid Statement from the college you will be attending.
3.  A copy of your college essay
4.  A copy of the in-school essay
5.  A high school transcript

Have you ever been convicted of a felony?  yes  no

I certify that all information on this form is true and complete to the best of my knowledge. \_\_\_\_\_ Signature \_\_\_\_\_ Date

Name \_\_\_\_\_  
Last First M.

Residential Address : \_\_\_\_\_  
Street Town State Zip

Mailing Address: \_\_\_\_\_

Birth Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security No. \_\_\_\_ - \_\_\_\_ - \_\_\_\_

School you will be attending \_\_\_\_\_

(Attach proof of acceptance) My school is \_\_\_\_\_ 4 year \_\_\_\_\_ 2 year

I will be enrolled \_\_\_\_\_ fulltime \_\_\_\_\_ part time (6 credits or less)

I will live \_\_\_\_\_ on campus \_\_\_\_\_ off campus

Field of Study \_\_\_\_\_

**Activities-(attach additional sheet if necessary)**

List all community and school activities in which you have participated. Include sports, student government, volunteer projects etc.

<u>Activity/How you participated</u>	<u>How Long</u>
_____	____ / ____ to ____ / ____

Special Honors \_\_\_\_\_

_____	____ / ____ to ____ / ____
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Special Honors \_\_\_\_\_

_____	____ / ____ to ____ / ____
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Special Honors \_\_\_\_\_

_____	____ / ____ to ____ / ____
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Special Honors \_\_\_\_\_

**Work Experience**

\_\_\_\_\_ paid \_\_\_ Non Paid \_\_\_ # hours per week \_\_\_\_\_  
Name of Employer Position Held Dates Held

\_\_\_\_\_ paid \_\_\_ Non Paid \_\_\_ # hours per week \_\_\_\_\_  
Name of Employer Position Held Dates Held

\_\_\_\_\_ paid \_\_\_ Non Paid \_\_\_ # hours per week \_\_\_\_\_  
Name of Employer Position Held Dates Held

\_\_\_\_\_ paid \_\_\_ Non Paid \_\_\_ # hours per week \_\_\_\_\_  
Name of Employer Position Held Dates Held

**Describe your education and career goals:**

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Describe personal or family circumstances which make it necessary for you to seek aid for your education:

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