Dorcas & Peter Pombay Scholarship

Dorcas 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 3, 2023

Thoroughly complete the following financial aid information:

_				
Amount of		ial aid you will receive: Loans		
	b.	Grants		
	c.	College Work Study		
	d.	Scholarships offered at college of	or university	
o be filled	e. out by	529 college saving plan or ot parent(s), based on latest federal i	her monies saved noome tax information:	YesN
		justed gross income ne 37 for 1040 and Line 21 for 1	040A	
Number of	people	living in your household	Adults	Students
Vill you ha	ve a jol	at college		yes n
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knowledge.		Signature		Date	
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Addrass.					
Address:	Street	Town	State	Z	ip
Mother's Name:		Father's Name:			
Birth Date/	_/	Social Security	No		,
School you will be att	ending				
(Attach proof of accep	otance) My scho	ol is	4 year	2 year	
I will be enrolled	fullt	ime part ti	me (6 credits	or less)	
I will live	on ca	mpusoff can	ipus		
Field of Study					
List all community ar student government, v Activity/How you par	volunteer projec		d. Include sports,		
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	Spe	ecial 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:

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