

Julia T. Pingree Student Scholarship

Application Instructions

New Hampshire Association of Education Office Professionals (NHAEOP) awards scholarships to graduating seniors from around the State who are pursuing a post-secondary education in a **business or education-related programs**.

Eligibility requirements:

1. Applicant is pursuing further education in a business-related or education-related program
2. Applicant is a graduating high school senior

Directions:

1. Please completely fill out the entirety of this application.
2. Please attach all required documentation.
3. Please attach an *Essay 500 words or less, "Why have you chosen to pursue a degree in business or education? What impact do you hope to have?"*
4. Please include *ONE official transcript*.
5. Please include *ONE letter of recommendation*.
6. Return the completed application and packet no later than **April 1** to Affiliation contact person: (scanning & emailing your application is preferred)

Patti Kallander
NHAEOP Scholarship Committee Co-Chair
HDHS
12 Hillcat Drive
Hillsboro, NH 03244
pkallander@hdsd.org

Applications postmarked or received via email after April 1 will not be considered.

Please include the following supporting documentation:

These forms can be found on www.nhaeop.org or by request by email at pkallander@hdsd.org

1. Application
2. Student/Academic Profile
3. FAFSA EFC
4. Applicant Appraisal
5. (1) Letter of Recommendation

Julia T. Pingree Student Scholarship Application

Student Name
Last First Middle D.O.B. mm/dd/yyyy

Parent/Guardian Names:

Legal Residence address:

Mailing Address (if different) _

Email Address:

Home phone:

Cell phone:

COLLEGE INFORMATION

What college do you plan on attending in the fall?

College Address:

What is your college objective?

If you have not decided yet, please list your top three colleges, including addresses.

1.

2.

3.

Accepted at what colleges:

I plan to attend ☐ Vocational/Technical School ☐ 2 yr. college ☐ 4 yr. college ☐ other: _____

I plan to enroll as ☐ Full time ☐ at least half-time ☐ less than half time

I plan to live ☐ On campus ☐ off campus ☐ at home

Anticipated major(s) First Choice: Second Choice: or Undecided

Tuition costs per year \$

Financial Aid for the year awarded by college \$

Expected Family Contribution \$

Student Profile

Student Name: _____

To be filled out by the student:

List of activities

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

List of work experiences

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Unusual or extenuating circumstances, including financial, to be considered:

Academic Profile

To be filled out by the School Counseling Center:

Student Rank _____ in a class of _____ Cumulative Weighted GPA _____ as of _____
(4.0 scale) Date

Testing Results:

SAT Scores (highest score attained): EBRW _____ Math _____ Writing _____

ACT Composite Score: _____

School Counselor Signature: _____

Date: _____

☐ I allow the School Counseling Center to release a transcript with this form to the appropriate scholarship committee.

Student Signature

Date

Applicant Appraisal Form

To the student: Please have this section of the application completed by a school administrator, school counselor, teacher, community or religious leader, employer, or other non-family member who is in a position of authority and who knows you and your accomplishments.

Please return the appraisal in a sealed envelope with the appraiser's signature across the seal and include it with the application materials.

Student Name: _____

To the Appraiser: The person whose name appears above is applying for a Scholarship. In consideration of each applicant, we place particular emphasis on comments from individuals whom the applicant has chosen to assess him or her. **Please place this form with your attached recommendation in a sealed envelope with your signature across the seal so that the applicant will not have access this information.**

Please rate the applicant as compared to his or her peers and comment on the following aspects of the applicant from your direct knowledge of him/her.

| Attributes and Abilities | Fair | Good | Excellent | Unable to Rate |
|--|------|------|-----------|----------------|
| Applicant's respect For self and others | | | | |
| Problem-solving skills, follow through and task completion | | | | |
| Critical thinking | | | | |
| Applicant sets realistic and attainable goals | | | | |
| Applicant demonstrates curiosity and initiative | | | | |
| Applicant is able to seek, find, and use learning resources | | | | |
| Leadership | | | | |

Please attach a typewritten evaluation of the student and comment on:

1. Applicant's areas of strength.
2. How the applicant has shown leadership.
3. The applicant's commitment to the school and community.

Appraiser's Signature

Title

Date