

Wantastiquet Grange Legacy Scholarship Fund

The purpose of this Fund is to provide scholarship assistance “to worthy” graduating students from Hinsdale High School. And who are pursuing higher education to any accredited post-secondary education or training institution including vocational/technical school, 2 or 4 year college or university **within the State of New Hampshire in the field of education or nursing.**

Determining factors will be:

*Hinsdale High School Graduate

*Entering the field of Education or Nursing

*College or University must be in the State of New Hampshire

*Financial Need

*Merit—Academic Work

*Participation in school/community activities

*Volunteerism

*****Applications are due in Guidance on May 6, 2024**

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 _____

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

Adjusted gross income _____

Total number of dependents claimed on federal income tax
Line 6-D from 1040 _____

Total number of family members attending college _____

Please include with your application: 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 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. _____

(Student Signature)

(Date)

Student Name _____
Last First M.

Address _____
City State Zip

Birth Date ____ / ____ / ____ Non-school email: _____

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.

Activity/How you participated _____ How Long _____ / _____ to _____ / _____

Special Honors _____

_____ / _____ to _____ / _____

Special Honors _____

_____ / _____ to _____ / _____

Special Honors _____

_____ / _____ to _____ / _____

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:

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