# 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-related program.

#### **Eligibility requirements:**

- 1. Applicant is pursuing further education in a business-related program.
- 2. Applicant is a graduating high school senior
- 3. Applicant has or will have completed four or more of the following courses from among the following:
  - a. Computer / Technology
  - b. Accounting / Bookkeeping
  - c. Financial Literacy
  - d. Marketing
  - e. Principles of Business
  - f. Business Law
  - g. Business Communications
  - h. Economics
  - i. Probability and Statistics

#### **Directions:**

- 1. Please completely fill out the entirety of this application.
- 2. Please attach all required documentation.
- 3. Please attach an Es say 500 words or less, "Describe what you expect to use your degree for How may that contribute to your community?"
- 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:

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

# Applications postmarked 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 info@nhaeop.org

- 1. Application
- 2. Student/Academic Profile
- 3. Family Financial Statement
- 4. Applicant Appraisal

# Julia T. Pingree Student Scholarship Application

Student Name				D.O.B.		
Last		First	Middle		mm/dd/yyyy	
Parent/Guardian Nam	ies:					
Legal Residence addre	ess:					
Mailing Address (if dif	ferent) _					
Email Address:						
Home phone:		Cell pho	ne:			
		COLLEG	GE INFORMATION			
What college do you p	lan on attending i	in the fall?				
College Address:						
What is your college o	bjective?					
If you have not decided	d yet, please list y	our top three co	olleges, including addresses	ā.		
1.	2	2.	3.			
Assembled atbat and la						
Accepted at what colle	ges:					
I plan to attend	☐ Vocational/	Technical Schoo	ol 🔲 2 yr. college 🔲 4	4 vr. college □ other	:	
I plan to enroll as			time 🔲 less than half ti			
I plan to live			ıs 🗖 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
	Academic Profile
To be filled out by the School Counseling	Center:
Student Rank in a class of	Cumulative Weighted GPA as of Date
Testing Results:	
SAT Scores (highest score attained): EB	RWMathWriting
ACT Composite Score:	
School Counselor Signature:	Date:
☐ I allow the School Counseling Center to committee.	release a transcript with this form to the appropriate scholarship
Student Signature	Date

#### **Family Financial Statement**

If you are a dependent student, please have your parents complete the **Parent Information** section of this form using their most recent IRS Tax Return. You must complete the **Student Information** section. You are a dependent student if you are under 24 years of age. **To help us assess need, it would be helpful if you attach the first two pages of your tax return.** 

Student Information					
Adjusted Gross Income	\$				
Medical/dental expenses not covered by insurance	\$				
Untaxed Income and Benefits (child support, AFDC, ADO, Social Secur	rity Income) \$				
Total Investments and Assets (excluding residence and car)	\$				
Current Liabilities (excluding residence and car)	\$				
Total Number of Family Members					
***************************************	***************************************				
Parent Information					
Parents' Marital Status as of Today:   Single   Married   Separated   Divorced   Widowed					
(The same information is required on the student's Free Application for Fe	deral Student Aid [FAFSA form].)				
Parent(s) Disabled: $\square$ Yes $\square$ No Head of Household Unemployed: $\square$ Yes $\square$	l No				
List all dependents living at home by name and age:					
How many dependents will be college students between July 1, 2021 and June 3	0, 2022				
Adjusted Gross Income	\$				
Medical/dental expenses not covered by insurance	\$				
Untaxed Income and Benefits (child support, AFDC, ADO, Social Security Inco	me) \$				
Total Investments and Assets (excluding residence and car)	\$				
Current Liabilities (excluding residence and car)	\$				
APPLICANT/PARENT CERTIFICATION I certify that all of the information on this form is true and complete to	N the best of my knowledge:				
Applicant Signature and Date Par	rent Signature and 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 seale the application materials.	d envelope with the	he appraiser's sign	ature across the sea	l and include it with
Student Name:				
To the Appraiser: The person who each applicant, we place particular eassess him or her. Please place this your signature across the seal so the Please rate the applicant as compared	mphasis on comm s form with your aat the applicant	ents from individu attached recomn will not have acc	uals whom the appli nendation in a seal ess this informatio	cant has chosen to ed envelope with n.
from your direct knowledge of him/h	er.			or or or orporount
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  1. Applicant's areas of stren 2. How the applicant has sh 3. The applicant's commitment	igth. own leadership.			
Appraiser's Signature	9 2	Title	Date	_