

Gloucester Pride Stride



Fundraising Walk to Benefit Cape Ann Non-Profits & Community Groups

GLOUCESTER PRIDE STRIDE SCHOLARSHIP AWARD

Organization	Gloucester Pride Stride Committee
Description	This scholarship is awarded to a student who demonstrates the drive to furthering their education. This student will continue to demonstrate a commitment to serving the Cape Ann community in the spirit of the Founders of Gloucester Pride Stride.
Amount	\$1000.00
Requirements	<p>Check off as you fulfill each one:</p> <ul style="list-style-type: none"><input type="checkbox"/> 1. A local resident who is a senior graduating from an accredited high school.<input type="checkbox"/> 2. Letter of Introduction<input type="checkbox"/> 3. Typewritten, double-spaced, 500-word essay on <u>How You Plan to Further Your Community Service</u>. (clearly labeled)<input type="checkbox"/> 4. Resume (clearly labeled), to include: Education, Honors and Awards, Extracurricular Activities, Volunteer/Community Service Activities, and Work Experience.<input type="checkbox"/> 5. Copy of Transcript of Grades<input type="checkbox"/> 6. Copy of acceptance letter from an institute of higher education or technical institute.<input type="checkbox"/> 7. Financial Statement Form found on the Gloucester Pride Stride website.
Limitations	Failure to further education in the Fall will forfeit the right to receive the scholarship. Upon successful completion of the first semester, forward a copy of the Transcript of Grades and proof of second semester enrollment. Scholarship will be funded at that time.
Send your application to	Gloucester Pride Stride Scholarship Committee P.O. Box 16 Gloucester, MA 01930 By April 1, 2020

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GLOUCESTER PRIDE STRIDE FINANCIAL STATEMENT FORM

Note: This form should be submitted with scholarship application.

NAME _____ DATE OF BIRTH _____

ADDRESS _____ TELEPHONE _____

NAME(S) OF PARENT(S)/GUARDIANS: _____

FATHER'S OCCUPATION: _____ MOTHER'S OCCUPATION: _____

NUMBER OF BROTHERS _____ AGE(S) _____

NUMBER OF SISTERS _____ AGE(S) _____

NAME OF COLLEGE(S) TO WHICH YOU HAVE BEEN ACCEPTED: _____

NAME OF COLLEGE YOU PLAN TO ATTEND: _____

ESTIMATE OF COST FOR **ONE** YEAR:

TUTION, FEES, BOOKS _____

BOARD AND ROOM _____

TRANSPORTATION _____

LIVING EXPENSES _____

TOTAL FOR ONE YEAR _____

ESTIMATED **TOTAL** COST OF **ENTIRE**

SCHOOLING (2 years, 4 years, etc.) _____

APPROXIMATE AMOUNT OF MONEY YOU HAVE OR YOU MAY EXPECT TO RECEIVE FROM OTHERS

SAVINGS _____ / _____
1 yr. over 4 yrs.

PARENTS _____ / _____
1 yr. over 4 yrs.

WORK _____ / _____
1 yr. over 4 yrs.

GIFTS, GRANTS _____ / _____
1 yr. over 4 yrs.

SCHOLARSHIPS _____ / _____
1 yr. over 4 yrs.

TOTAL _____ / _____
1 yr. over 4 yrs.

DATE _____

SIGNATURE OF APPLICANT _____

EMAIL ADDRESS _____