



2018 MALSCCE Memorial Scholarship

Application Deadline: October 31, 2017

Applicant: Please give your completed application to a sponsor to submit for you.

Sponsor: Please forward this application along with your letter of recommendation to:

**Mary Ann Corcoran, PLS, MALSCCE Education Trust Chair,
c/o The Engineering Center, One Walnut Street,
Boston, MA 02108 413-841-0355
mcorcoran@hillengineers.com**

Name:		
Home address:		
School address:		
Tel. No.:	Email Address:	
Marital status:	Ages of any children:	Expected year of graduation:
Spouse's name:	Occupation:	
Place of employment:	Annual gross income:	
Father's name:	Occupation:	
Place of employment:	Annual gross income:	
Mother's name:	Occupation:	
Place of employment:	Annual gross income:	
Are both parents living?	Divorced or separated:	
Parents place of legal residence:		
Number of siblings:	Number in college:	
Please provide the following information:		
Monthly amount of any Veterans' benefits you receive, if applicable:		
Total amount of all outstanding loans:		
Total amount of any other scholarships for higher education:		
How much of other scholarship funds are available for next year's bills:		
Monthly earnings for any current college work/study or co-op income:		
Amount of savings available:		
Expected Family Contribution from Student Aid Report:		
Annual expenses: for Tuition/fees?	For room and board?	

Education Record:

(Please list all schools you have attended, starting with the high school where you graduated)

School:	Years Attended:	Major, if applicable	Diploma/Degree:
List your extracurricular activities:			
Sports, hobbies and interests:			

Employment Record:

<u>Place of Employment:</u>	<u>Position:</u>	<u>Employment Dates:</u>	<u>Earnings:</u>
How much of the above earnings will be available for school costs?			

Please give specific answers to the following questions (you may attach 8 1/2 x 11 sheets, if necessary):

How do you plan to finance your education?

What are your specific short term and long range goals and what do you hope to achieve in life?

Why do you want to be considered for a scholarship? Please include any information that might aid the Trustees in evaluating your application:

<u>SPONSOR CONTACT INFORMATION:</u>	
Name:	
Address:	
Work Tel:	
Work Email:	
Relationship to applicant:	
Sponsor's Signature:	Date:

APPLICANT'S AFFIRMATION:

I hereby submit my application for the MALSCE Education Trust Memorial Scholarship. I authorize MALSCE and/or its representatives to contact any of the employers or educational institutions listed above. By signing this application, I am affirming that the information contained here is accurate.

Applicant's Signature: _____ Date: _____