

Education Trust

2023 Memorial Scholarship Application

Application Deadline: Wednesday, November 30, 2022

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:

Thadd Eldredge, PLS, MALSCE Education Trust Chair

c/o The Engineering Center, One Walnut Street, Boston, MA 02108

508-945-3965, thadd@ese-llc.com

Applicant Information:

Name:				
Home address:				
School address:				
Telephone number:		Email Address:		
Marital status:	Ages of 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:				
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	ools you have attended, starting with the high school where you graduated				
School:	Years Attended:	Major, if applicable:	Diploma/Degree:		

List your extracurricular a	activities:		
Sports, hobbies, and inter	ests:		
Employment Reco	ord:		
Place of Employment:	Position:	Employment Dates:	Earnings:
How much of the above e	arnings will be available	for school costs?	
Additional Inform	nations		
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Please give specific answ	vers to the following que	stions (you may attach 8 ½ x 11 sh	neets, if necessary):
How do you plan to finan	ce your education?		
What are your specific sh	ort term and long range g	oals and what do you hope to achiev	ve in life?
Why do you want to be co	onsidered for a scholarshi	p? Please include any information the	nat might aid the Trustees in
evaluating your application	on:		
Sponsor Contact 1	Information:		
Name:			
Address:			
Work Telephone:			
Work Email:			
Relationship to Applicant	:		
Sponsor's Signature:		Date:	
10 40 A 000	mation:		
Applicant's Affirm	nauvn.		
hereby submit my applica	ation for the MALSCE Ed	lucation Trust Memorial Scholarship	

Date:

Applicant's Signature: