

80 Middle Street, Fairhaven, Massachusetts 02719

## John Moniz Commemorative Scholarship Application

## Criteria for eligibility:

- 1.) Graduate of an accredited secondary school or equivalent by August 31 of the application year.
- 2.) Acceptance into a full-time program at an accredited institution of higher education.
- 3.) Child or grandchild of a member in good standing of the Acushnet River Safe Boating Club, Inc. (ARSBC).
- 4.) Not a previous recipient of this scholarship.

Application deadline: June 1, (postmark or hand delivery after June 1 will not be considered)

1. Name:				
	(Last)	(First)	(Middle)	_
2. Address:	(Street)			
3. Telephone: _	(City)	(Sate)	(Zip)	
		Child	_Grandchild	
5. Name of AR	SBC member:		Auxiliary #:	_
6. Are you employed:YesNoJob title:				
			Job title:	<u> </u>
8. Father's nam Employ	ne:		Job title:	
9. List any siste	ers or brothers you hav	e, their age, and the nan	ne of the school they are attending:	
(Name)		(Age)	(School attending)	
(Name)		(Age)	(School attending)	
(Name)		(Age)	(School attending)	
(Name)		(Age)	(School attending)	

10. Name of school you are now a	attending:	
11. List awards, honors or scholars community:	ships you have won in the school	you are presently attending, and within the
12. List extracurricular activities y	you are involved in:	
13. List community activities you	are involved in:	
14. List in order of choice, the schaccepted:	nool(s) or college(s) you plan to en	nter, your chosen area of study, and if
(School name)	(Major)	(Accepted)
The completed application	and the following documents mu	ust be received by June 1:
		area of study, mention any accomplishments r, as well as any family financial needs.
b.) A <i>transcript</i> of your h	igh school or college grades.	
The completed application	and supporting documents shoul	d be mailed to:
Nancy Hebert 33 Chestnut Street Fairhaven, MA 02		
I certify that all statements made in to the best of my knowledge.	n this application and in the supp	orting documents are accurate and complete
(Signature of applicant)		(Date)