

2015 Scholarship Application
MANOLIS FAMILY FOUNDATION, INC.
1067 Lakeview Avenue
Dracut, MA 01826
manolisff@comcast.net

I. Eligibility:

1. Applicants must be completing their senior year of high school at Dracut High School, Greater Lowell Technical High School or Westford Academy.
2. The applicant must have been accepted to pursue education beyond the secondary school level, on a full-time basis, at an institution deemed accredited by the Board Members of the Manolis Family Foundation, Inc.
3. The applicant must demonstrate financial need, a good scholastic record and be of good character. Involvement in community work or work experience and/or participation in extra curricular activity would be advantageous.
4. Applications must be received at the above noted address by **April 15, 2015**.

II. Requirements:

1. A completed application must be submitted to the Manolis Family Foundation prior to the application deadline.
2. A copy of the student's High School Transcript **must** accompany the application.
3. Two (2) letters of character reference from a Guidance Counselor, Teacher, Employer, or Non-Family Adult Acquaintance **must** accompany the application.
4. A copy of the college acceptance letter for the institution which you plan to attend **must** accompany application.

Note: Failure to properly complete the application with all the attachments or to meet the application deadline date of April 15, 2015 will make you ineligible for an award.

III. Disbursement of Award:

1. Scholarship will be awarded upon receipt of official academic record of registration.

b. _____

c. _____

d. _____

11. List any work experience(s) you have had during your high school years:

a. _____

Employer

Address

Position held

b. _____

Employer

Address

Position held

12. List and describe any community volunteer work:

13. List and describe any extra curricular activities in which you have participated in while attending high school. (i.e. clubs, athletics, organizations, awards.)

14. Explain any special circumstances that you feel the Manolis Family Foundation, Inc. Review Committee would consider important in reviewing your application (handicap, financial hardship, other):

If additional space is required please attach an 8 1/2 by 11 paper

I certify that the information on this application is accurate and is given with our knowledge and approval. I hereby authorize the members of the Manolis Family

Foundation, Inc. to examine any records, including school and athletic records and any other information pertinent to this application.

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____