



**RD26 Foundation Scholarship Application. Scholarship in the amount of \$1500.00**

Please <b>type</b> or <b>print</b> your answers. If application is illegible it will not be considered.	
1.	Last Name: _____ First Name: _____
2.	Mailing Address: Street: _____ City: _____ State: _____ ZIP: _____
3.	Daytime Telephone Number: (     ) _____
4.	Date of Birth:   Month                      Day                      Year
5.	High School presently attending:
6.	Grade Point Average (GPA): _____ (On a 4.0 scale)
7.	Anticipated graduation date:
8.	What specialty/major do you plan to pursue?
9.	Estimated date of college/trade/vocational school graduation: _____
10.	Name & address of parent(s) or legal guardian(s): Name: _____ Address: _____ City, State, Zip _____ Phone Number of parents or legal guardian: _____

11.	What are your educational and professional goals and objectives? (Attach if preferred)
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12. Personal Essay

In a few words Please explain how you last made someone smile or laugh.

13. Who or What made you a better person than you were one year ago?

14.	The following items must be attached to this application in order for the application to qualify to be reviewed by the scholarship committee. Incomplete applications will not be considered.
	<b><u>Two references from faculty. One must be from a teacher and one must be from an adult leader in an athletic program, community project or volunteer program you have participated in.</u></b>

**STATEMENT OF ACCURACY**

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that my picture may be taken and used for any purpose deemed necessary to promote the scholarship program.

Signature of scholarship applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**REMEMBER**

**Please return all required materials to:**

RD26 Foundation-Scholarships.  
C/O 21Craigwood Terrace  
Wilbraham, MA 01095