



Sally Roberts Mentor Scholarship

The purpose of the Fund shall be to provide a scholarship to a student who plans to pursue a career enriching the lives of children (education, social work, etc.). Special consideration will be given to any student that participated in or volunteered /worked for a Mentoring Youth Program.

A scholarship of \$1,000 per year, for a period not to exceed 4 years.

Required: Application, Transcript, a Letter of Recommendation, a Personal Statement of your choice, plus any other supporting materials which you feel would be helpful.

Personal Data

Name: _____
(Last) (First) (Middle) (Gender)

Mailing Address: _____
(Street or PO Box) (City) (State) (Zip)

Physical Address: _____
(Street or PO Box) (City) (State) (Zip)

Telephone: _____
(Cell Phone) (Home Phone)

Email Address: _____

Best Way to Contact: Cell Phone Home Phone Email

Date of Birth: _____

Parent(s)/Guardian(s) Name(s): _____

Parent(s)/Guardian(s) Address (if different from yours): _____

Best Way to Contact Parents: _____
Provide contact information

Parent(s)/Guardian(s) Marital Status: Single Married Divorced Widowed

Academic Data

Name of High School: _____ Year of Graduation: _____

Cumulative High School Grade Point Average: _____ (Please attach transcript.)

(If you are in college, please attach current transcript.)

Names of Colleges or Universities you have applied to or have been accepted to:

College or University you plan to attend: _____

Why do you want to attend this school?

What is your intended field of study? _____

What do you hope to do with your education?

Why should you be chosen as the recipient of this Scholarship?

School and Community Involvement

Did you participate in any Mentoring Youth Nantucket Programs (MY Nantucket)? _____
If so which one(s) and for how long?

List any organization in which you have been a member or jobs in which you have been employed. Organizations may include academic, athletic, civic, religious or social groups. Jobs may also include volunteer work or internships. Attach another sheet if necessary.

<u>Activity</u>	<u>Number of Years</u>	<u>Positions or Offices Held</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List any awards, honors or recognition received:

Which of the above experiences (participation in a particular activity, leadership position or honor received) has been most important to you and why?

Anticipated Costs for the Upcoming Year

	Costs
Tuition & Fees	\$
Room & Board	\$
Books & Supplies	\$
Personal Expenses (Travel, computer, etc)	\$
Other	\$
TOTAL COST OF ATTENDANCE	\$

Estimated Amount You Can Pay Towards Costs for the Upcoming Year

Parent/Guardian	\$
Self	\$
Scholarships	\$
Loans	\$
TOTAL FUNDS AVAILABLE FOR COLLEGE	\$

Do you plan to work during the summer? _____ Where? _____

Do you plan to work during the school year? _____ Where? _____

If there are special financial circumstances which will affect your education, please describe:

Student's and Parents' Statements:

I have checked this application for errors and omissions and state that the information on this application is complete and accurate.

Scholarships may not be awarded to any donor/advisor or substantial contributor to the Fund making the award, to any member of a selection committee for such award, or to any members of their families. Applicants must also attest to not being related to a either significant donor or advisor of the scholarship for which they are applying. This includes parents, grandparents, great grandparents, spouse, siblings, children, grandchildren, great grandchildren and the spouses of all of the above.

Applicant's signature _____ Date _____

Parent's signature _____ Date _____

Please submit by **9AM on April 29, 2020**
Community Foundation for Nantucket
PO Box 204
Nantucket, Massachusetts 02554
-or- cjensen@cfnan.org