

JOSIAH WILLARD HAYDEN RECREATION CENTRE, INC. COLLEGE SCHOLARSHIP PROGRAM

24 Lincoln Street – Lexington, Massachusetts 02421

Application

(For Lexington, Massachusetts Residents Only)

You are urged to follow these directions *carefully* if you expect to have your application considered:

1. High school seniors and those who did not receive a scholarship last year must include a high school and/or college transcript and recommendations from teachers or guidance counselors.
2. Every query must be answered.
3. Make sure that all items on your budget are complete.

NAME _____ AGE _____
First Name Middle Name Last Name

ADDRESS _____

EMAIL _____ PHONE _____

Father's Name _____ Occupation _____

Mother's Name _____ Occupation _____

Are your parents separated or divorced? _____

List Names and Ages of Brothers and Sisters:

_____ Age _____
 _____ Age _____
 _____ Age _____
 _____ Age _____

Have you applied for scholarship assistance from any other institution or individual: Yes _____ No _____

If you have, list name, amount or status:

Name _____ Amount _____

Status: Approved _____ Pending _____ Rejected _____

College Status (next fall): Freshman _____ Sophomore _____ Junior _____
 Senior _____ Post Graduate _____ Other _____

If entering college as a Freshman, give name of college preference: _____

Have you been accepted? _____*

**This question must be answered in the affirmative before the application will be considered.*

REFERENCES

Give two personal references (not relatives or related by marriage), who are mature persons, householders, property owners, or business and professional men or women, of good standing in the community, who have known you well for several years, and who know of the financial circumstances of your family. One of them should be from Lexington. Your banker, your family physician, or a member of the high school or college faculty, *who knows you personally*, would be desirable references. In listing references, be sure to give first and middle names (or initials) as well as last name, i.e., "John A. Blank" or "J.A. Blank" and not "Mr. Blank."

Full Name – Please Print	Approx. Age	Address	Present or most recent occupation

BUDGET (for academic year starting this fall)

<i>Estimate Income</i>		<i>Estimated Expenditures</i>	
Savings from previous earnings	\$	Tuition	\$
Advances from parents	\$	Board <i>*(See note below)</i>	\$
Advances from friends	\$	Room <i>*(See note below)</i>	\$
Advances from other sources	\$	Books and materials	\$
Expected earnings during summer vacation (net)	\$	Health	\$
Expected earnings during school year	\$	Clothes	\$
Gifts or other income	\$	Personal expenditures	\$
Scholarships <i>** (see note below)</i>	\$	Incidentals (explain)	\$
		Insurance	\$
		Automobile maintenance	\$
		Travel	\$
		Commutation	\$
DEFICIT	\$	Recreation	\$
Total	\$	Total	\$

*Do not make an entry if you will live at home without charge.

**If you are awarded a scholarship after this application has been submitted, it should be reported promptly to our Scholarship Committee.

Use this space for notes you consider necessary to explain any item in your budget:

List your most recent academic records and extracurricular activities and any other information you consider pertinent to this application:

DECLARATION OF APPLICANT

I have read over my answers to the questions on this application blank and solemnly affirm the correctness of every statement made by me on said blank. I submit herewith my application for a Scholarship.

(Date)

(Signature)

JOSIAH WILLARD HAYDEN RECREATION CENTRE, INC. SCHOLARSHIP COMMITTEE

24 Lincoln Street – Lexington, Massachusetts 02421

PARENTS' CONFIDENTIAL STATEMENT IN SUPPORT OF APPLICATION FOR FINANCIAL AID FOR ACADEMIC YEAR 2011-2012

The Hayden Scholarship Committee considers that the fairest way of determining the financial need of a family is to require the parents of each applicant to submit a detailed financial statement in writing. This Parents' Confidential Statement has been prepared in a manner to assist our Scholarship Committee in making an equitable determination of need for financial assistance. It follows closely the statement being used currently by the College Scholarship Service. So that each applicant is prepared for any questions the committee may ask, we strongly encourage parents to review the information with the applicant prior to the interview.

- a) Type or print all items of information.
- b) Complete all items, drawing a line through any item that does not apply to your case. Enter amounts in dollars – omit cents.
- c) If you do not find sufficient space on the form itself, please attach a separate sheet bearing the name of the student applicant.
- d) Parents' 2010 IRS form 1040, pages 1 and 2.

1.	Student applicant	Last name	First name	Middle name	Date of Birth	Month	Day	Year
2.	Student applicant's home address				Parents (check if living)		Are living parents?	
					<input type="checkbox"/> Father	<input type="checkbox"/> Stepfather	<input type="checkbox"/> Divorced	
					<input type="checkbox"/> Mother	<input type="checkbox"/> Stepmother	<input type="checkbox"/> Separated	

FATHER OR GUARDIAN		MOTHER OR GUARDIAN	
3. Name	Age	3. Name	Age
4. Home Address			
5. Name and address of employer or firm			
6. Nature of business			
7. Position held			
8. Name of bank at which you have an account			

9. Beginning with applicant, list here all children and indicate extent of financial support they received during 2010. Give specific dollar amounts where requested. Complete all 9 columns for children in college. Complete only first 6 columns for all other children.

Name	Name of school, college or occupation	Check if dependent for income tax purposes	Age	If in school or college indicate		Amount of annual support from family exclusive of amount paid for school or college	Estimated amount paid for school or college expenses for year 2010-2011	Amount of scholarship aid received for school or college for 2010-2011
				Public or private	Grade level			
Applicant						\$	\$	\$
Other children						\$	\$	\$
						\$	\$	\$
						\$	\$	\$
						\$	\$	\$

10. Please list here dependents (other than children) receiving financial support from family.

Name	Age	Relationship to you	Check if dependent for income tax purposes	Check if living with family	Estimated amount of total annual support from family
					\$
					\$

11. Please give make and year and model of any family automobiles: Present auto indebtedness \$

The Scholarship Application and Financial Report must be completed and returned together to the Josiah Willard Hayden Recreation Centre Scholarship Committee, 24 Lincoln Street, Lexington, Massachusetts 02421 or Lexington High School, Guidance Office on or before April 11, 2011. APPLICATIONS RECEIVED AFTER THIS DATE WILL NOT BE ACCEPTED.

12-13. Please explain in this space any extraordinary expense or special family circumstances we should know about; for example, dependencies, illness, special housing problems, etc. If other children are heading for college, graduate school, or private school next year, *please indicate name of probable college or school of such other children and the total estimated amount you will pay for school or college expenses*. If additional space is required, please attach a separate sheet bearing name of student applicant.

PARENTS' ANNUAL INCOME AND EXPENSES

Note: All applicable figures listed below in the "Actual 2010" column should agree with those on your 2010 Federal Income Tax Return.

14. Salaries and wages before taxes		Actual 2010	Estimated 2011
Father	\$		\$
Mother	\$		\$
<hr/>			
15. Income from rents, interest, dividends, etc.			
Father	\$		\$
Mother	\$		\$
<hr/>			
16. Income from all other sources. (Specify)			
Father	\$		\$
Mother	\$		\$
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17. Gross Income (add 14, 15, and 16)		\$	\$
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18. EXPENSES:	TOTAL:	\$	\$
Income Taxes		\$	\$
Real Estate Taxes		\$	\$
Other taxes (specify)		\$	\$
Auto purchase payments		\$	\$
Rent – home		\$	\$
Interest – home mortgage		\$	\$
Other expenses (specify)		\$	\$
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19. Net Income (17 less 18)		\$	\$

20. State Number of Exemptions (\$3,200.00 each) claimed on your 2010 Federal Income Tax Return:

If you owned your own business, please attach schedule giving full details of income and expenses.

PARENTS' ASSETS AND LIABILITIES

	Present sale value	Unpaid mortgage	Difference
21. Home (if owned)	\$	\$	\$
22. Other real estate	\$	\$	\$

STUDENT'S OWN ASSETS

23. Please list total assets student has in own name, such as bank account, trust fund, inheritance, stocks, bonds, real estate, and current cash value of annuities or educational or other insurance policies. If there are any restrictions on the use of these assets, please explain fully and indicate amount currently available for school expenses. In particular, it is important that terms of educational insurance or funds be explained in full.

Nature of asset	How obtained	Value
		\$
		\$
		\$

PARENTS' SIGNATURES

We have checked this form for omissions and errors. To the best of our knowledge, the information reported is complete and correct.

Signatures of both parents (or guardian) { _____

Date _____