

Scholarship Application 2023

First	Middle	Last		
Home (Legal/Permanent) A	ddress:			
	Address	Town	State & Zip	
Student email:		Date of Birth:		
Current School:		Contact Person:		
Parent/Guardian Name(s):				
Address:		Phone:		
Parent/Guardian e-	mail:			
Educational Institution to b (Your address at end of sen	e attended: nester is necessary to send notific	ation and required information,	/forms)	
Year you expect to graduate	e: Curi	riculum to be pursued:		
School website:				
State why you feel you dese	erve this scholarship:			
Have you applied for other				

State name of prior employers and	res, name of employer: periods of employment:	
Participation in school clubs/organ	izations:	
Personal references (not relatives)	:	
Name:	Address:	
Name:	Address:	
education further and stat	paper, write a concise statement of why e your specific career goals. n, please include letters of recommends	
Signature of Applicant:		
Signature of Parent of Guardian: _		
	, have read the foregoing applic is applying for a scholarship	
	further his/her education in the field of	

THIS SCHOLARSHIP WILL BE GIVEN UPON SUCCESSFUL COMPLETION OF THE FIRST COLLEGE SEMESTER AND SUBMISSION OF A 2ND ENROLLMENT OF A FULL TIME STUDENT.

Please send completed application by April 28, 2023 to

Carolyn Brogan
GCM Scholarship Committee Chairman
PO Box 92
Manchester, VT 05254