

13. Tuition costs for next year \$ _____

15. Room and Board costs for next year \$ _____

14. Financial Aid awarded for next year: By school \$ _____; Other sources \$ _____

If available, please attach *Student Aid Report (SAR)* or other relevant financial information.

15. Please attach a typewritten paragraph or more commenting on your academic experience in college as well as on any work or activities in which you are involved. Be sure to include any information you think the Committee should know and explain why you believe you should be awarded an Eleanor Campbell scholarship. The Committee considers this response of great importance and expects that you will take care with spelling, grammar, and organization.

16. Please attach a copy of your college transcript. Be sure it includes your grades for this past fall semester or your last semester completed. Your application cannot be considered without an up-to-date transcript.

17. If it is possible, it would be to your advantage to include a *letter of recommendation* from someone who knows your work at college.

18. Parent Information (This section to be completed if you are not an independent student. You are considered to be an independent student if you are over 24 years of age; or have a child; or are homeless or living under the threat of being homeless.)

Parent's marital status as of today: Single Married Separated Divorced
 Widowed

Parent(s) Disabled? Yes No Head of household unemployed? Yes No

List all dependents living at home by name and age

How many will be college students during the year for which you are requesting scholarship? _____

Adjusted Gross Income \$ _____ Medical/dental expenses not covered by insurance \$ _____

Untaxed income and benefits (child support, AFDC, ADO, Social Security income) \$ _____

Current liabilities (excluding residence and car) \$ _____

Are there others who are obligated to contribute to your child's college costs? _____

Applicant / Parent Certification

I certify that all of the information on this form is true and complete to the best of my knowledge.

Applicant Signature and date

Parent signature and date

Student Social Security number ____ - ____ - ____

Please note: Social Security numbers, like all information on the application, are kept in strict confidentiality. Students who wish to may write the Social Security number, seal it in an envelope with the student's name on the outside, and attach it to the application. Scholarship awards will be made to students who have supplied the Treasurer with a Social Security number.

Submission

Once you have assembled all your documents, paperclip them to your completed application form and mail the packet to: Eleanor Campbell Charitable Fund c/o Scholarship Committee
PO Box 1653 Hillsborough, NH 03244. Your application must be received by April 15.

Your questions concerning the application form may be addressed to:

Hillsborough / Deering:

Alex Luhtjarv pavlov999206@hotmail.com or by phone at (603) 899-6278

Weare:

Chris Hague at wooden_tent@yahoo.com or by phone at (603) 529-2064