

2024 - 2025 Scholarship Application for In-College Students

All Scholarships issued by The Scholarship Fund of Concord and Carlisle are based on financial need. If you will be attending a college that meets 100% of unmet need as their financial aid policy, it is very unlikely that you will be eligible for an award from The Scholarship Fund of Concord and Carlisle.

This application will be treated in strict confidence. The information on this application may be shared with the selection committees and the various organizations who fund awards through The Scholarship Fund of Concord and Carlisle. In addition, it is our policy to publish the names of all award recipients on our website as well as in our town report to Concord and Carlisle. If you receive an award and wish to remain anonymous, please email the [Award Committee Chair](#).

Eligibility: To be eligible for consideration, you must be a current or past resident of Concord (MA) or Carlisle (MA), or have attended school in either of these towns.

How to apply:

- 1) Complete this application form with care. It is the Awards Committee's first impression of you as a candidate for financial assistance.
- 2) Please do not submit your application until you are able to complete all of the information. That includes your college choice and financial details.
- 3) **Deadline:** Your application must be completed and submitted by April 1, 2024.

SAVING YOUR APPLICATION TO FINISH LATER: If you would like to save the information you have put into your application and finish the application later there is a spot to do that on each page. Just click YES and NEXT to save and then click the submit button. When you return please uncheck YES to continue on to the next page. You can save your work and return multiple times.

Your application will not be considered complete until Section 6 is signed with your name and date.

Please send any questions regarding this process to our email address at Info@thescholarshipfundofcc.org.

* Indicates required question

1. Email *

2. Permanent email (if address listed above is a school email).

Available Scholarships

Completion of this application and submission of all the supporting documents will result in your being considered for one or more of the Named Scholarships listed here.

<https://www.thescholarshipfundofcc.org/named-funds>

You will also be considered for scholarships sponsored by these local organizations.

<https://www.thescholarshipfundofcc.org/list-of-current-affiliates>

3. Last Name *

4. First Name *

5. MI

6. Phone *

7. Gender Preference/Preferred Pronouns

8. Home Address *

9. City/Town *

10. State *

11. Zip *

Mailing Address

Only fill out this section if your mailing address is different than the address given above.

12. Street Address (Mailing Address)

13. City/Town (Mailing Address)

14. State (Mailing Address)

15. Zip (Mailing Address)

16. Select yes below to save your work now and continue later. Make sure you click next for either answer.

Mark only one oval.

Yes, I would like to save my work now and continue later

No, I would like to continue to the rest of the application

College Information

Please tell us about your interests and activities.

17. Are you the first generation in your family to attend college? *

18. College you are attending *

19. Expected year of graduation *

20. Current major?

21. Please tell us something about your time in college and any clubs or extra-curriculars you may have participated in. *

22. Tell us about your major and any career plans you currently have. *

23. Select yes below to save your work now and continue later. Make sure you click next for either answer.

Mark only one oval.

Yes, I would like to save my work now and continue later

No, I would like to continue to the rest of the application

Parent or Guardian Information

24. Name (Parent 1 or Guardian) *

25. Address *

26. City *

27. State *

28. Occupation *

29. Employer *

30. Phone *

31. Email *

32. Marital Status (Parent 1) *

Mark only one oval.

Married

Separated

Divorced

Widowed

N/A

33. If Parent 1 is deceased please indicate their date of death.

34. Name (Parent 2)

35. Address

36. City

37. State

38. Occupation

39. Employer

40. Phone

41. Email

42. Marital Status (Parent 2)

Mark only one oval.

- Married
- Separated
- Divorced
- Widowed
- N/A

43. If Parent 2 is deceased please indicate their date of death

44. Select yes below to save your work now and continue later. Make sure you click next for either answer.

Mark only one oval.

- Yes, I would like to save my work now and continue later
- No, I would like to continue to the rest of the application

Financial Information

45. Are there any extenuating circumstance The Scholarship Fund of Concord and Carlisle Awards Committee should take into consideration when reviewing your application? These might include, for example, the number of siblings in college next year, recent college graduates, illness or death in the family, the care of extended family, recent job loss, divorce or separation, or military deployment.

College Cost of Attendance

Limit responses to numbers, no symbols or commas

46. How did you pay for college this year? How much came from your parents, you, student loans and scholarships. Please list each source with amount.

2024-2025 Estimated costs

47. Tuition *

48. Room & Board *

49. Required Fees *

50. Total College Costs (A)- this is the total of the above costs. *

51. Did you receive a letter from your college telling you about your aid package? If so, please upload it here.

Files submitted:

What funds will you use to pay your college bill?

Please use numbers only, no symbols or commas

52. Scholarships/Grants *

53. Loans *

54. Parents/Family *

55. Student *

56. Total (B)- this is total of scholarships/grants, loans, family, student *

57. Unmet Need (Total College Costs A - Total B) = *

58. Select yes below to save your work now and continue later. Make sure you click next for either answer.

Mark only one oval.

Yes, I would like to save my work now and continue later

No, I would like to continue to the rest of the application

FAFSA and Transcript

FAFSA

Complete the [Free Applications for Federal Student Aid \(FAFSA\)](#) by clicking on the link. It may take up to four weeks for your FAFSA request to be processed. Plan accordingly.

After fully completing and submitting the FAFSA you will receive a report from the federal government called the FAFSA Submission Summary with a calculation of the Student Aid Index (SAI). Please make a copy of your Submission Summary to upload below.

59. Please upload your Submission Summary. (Your application will not be considered complete until it is uploaded)

Files submitted:

60. Please have your current school mail us a transcript to this address: The Scholarship Fund of Concord and Carlisle 34 Walden St Unit 217, Concord MA 01742-2542. If your school is unable to mail us a transcript please upload a pdf of your transcript.

Files submitted:

61. Select yes below to save your work now and continue later. Make sure you click next for either answer.

Mark only one oval.

- Yes, I would like to save my work now and continue later
- No, I would like to continue to the rest of the application

Signature

Your signature indicates that all the information is true and accurate.

62. Signature (Type your name) *

63. Date *

Example: January 7, 2019

APPLICATIONS AND SUPPORTING MATERIALS NOT SUBMITTED VIA THIS FORM BY APRIL 1ST, 2024 WILL BE MARKED INCOMPLETE AND WILL NOT BE CONSIDERED.

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