

MASSACHUSETTS HARBORMASTERS ASSOCIATION NORTH SHORE CHAPTER



APPLICATION FOR SCHOLARSHIP

Name:	Birth Date:	M F
Address:	Telephone:	
Father's Name:	Occupation:	
Mother's Name:	Occupation:	
List brothers and sisters living at home and their ages:		
/	_//	
Are any of your brothers or sisters attending college?		
Name of sibling College attending _		Year
Name of sibling College attending _		Year
Are any receiving financial aid?		
To which schools have you been accepted?		
Which school will you attend?		
Do you plan to work this summer? Yes	No	
If yes, where?		
Have you filed and F.A.F. form? Yes	No	
If No, do you intend to file? Yes No		
If Yes, please attach a copy of your Financial Aid award le	etter to this form.	

Please include with this application a brief essay describing your contemplated program of studies at college and your future goals.