



Scholarship Application
POSTMARK DEADLINE: April 30

1. APPLICANT DATA

Full Name	
Birthday	
Contact Email*	
Contact Telephone	
Mailing Address	
Current School Attending	
Current Grade in School	
Have you attended PCC before?	
How did you hear about the PCC-AO Scholarship?	

**Note: all applicants will be contacted by email about their application*

2. FAMILY/HOUSEHOLD INFORMATION

Who do you live with? Add more on the back as needed.

Name	Relation to you	Age	Occupation / School / Other

3. SCHOOL ACTIVITIES, AWARDS & HONORS

List all school activities in which you have recently participated (e.g., student government, music, sports, etc). Note all special awards, honors and offices held.

Activity	# Years	Special awards/honors	Offices held

4. COMMUNITY SERVICE/VOLUNTEER ACTIVITIES

List all recent community activities in which you have participated without receiving payment.

Organization	From (mo/yr)	To (mo/yr)	Activities

5. PERSONAL ESSAYS ****Please do not include your name on or in any essays.****

Please answer and attach the following questions. Each response should be 100 words or less.

- Why do you want to attend to PCC this summer? Describe what attending will mean to you.
- Tell us one goal you have for yourself during the six weeks of PCC. How will you accomplish this?
- Tell us one goal you have for your future career or college aspirations. How will attending PCC help you to accomplish this goal?
- Please describe any special life circumstances you would like the Scholarship Review Committee to consider when reviewing your application.

6. PARENT/GUARDIAN ESSAY (optional)

****Please do not include your/your student's name on or in the essay****

Is there anything about your student that you feel the committee should take into consideration when reviewing his or her application?

7. REFERENCES

Please provide two references. These references should not be members of your family. These references may be contacted to gather further information about your application.

Reference 1:

Full Name: _____

Relation to applicant: _____

Telephone Number: _____

Email Address: _____

Reference 2:

Full Name: _____

Relation to applicant: _____

Telephone Number: _____

Email Address: _____

APPLICATION CHECKLIST

Applicants are responsible for submitting all materials to PCC-AO on time and in **ONE ENVELOPE**. Incomplete applications will not be reviewed. This application becomes complete only when all of the following materials have been received:

- Completed application form
- Current complete transcript
- Essays
- Signatures

All materials (including recommendations) must be submitted in **ONE ENVELOPE** addressed to:

PCC-AO
% 210 Temple Street
Whitman, MA 02382

POSTMARK DEADLINE: April 30th

CERTIFICATION

The PCC-AO has sole responsibility for selecting recipients based on criteria as set forth by the Scholarship Review Committee. This application becomes property of PCC-AO.

I acknowledge all decisions are made by PCC-AO. I certify that the information provided is true, complete, and correct to the best of my knowledge. If requested, I will provide proof of information. Falsification of information may result in termination of any award granted. I give my consent for representatives from PCC-AO to discuss my eligibility for scholarship assistance. I also agree that PCC-AO may provide a copy of my full application to the PCC Board of Directors.

Applicant's Signature: _____ Date: _____

I acknowledge that if my child is chosen to receive a PCC-AO Scholarship, that he/she may be interviewed.

Parent's or Guardian's Signature: _____ Date: _____