



Tramuto
FOUNDATION

MENTORING PROGRAM - 2017 APPLICATION FORM

A mentor can make all the difference in someone's life



The Tramuto Foundation's newest program provides scholarship recipients with the opportunity to gain confidence, develop leadership skills, and build friendships through a direct mentoring relationship with one of our Advisory Board members. Guidance provided by our professional board members helps students learn to address the typical challenges and issues that are a part of college, and gain the confidence they need to succeed in their studies and in life. Scholarship recipients are strongly encouraged to apply.

General Instructions for Applicants

Applicants must use the official Tramuto Foundation form that has been dated and signed by the student and parent(s) or guardian. Typewritten applications and statements are preferred over handwritten submissions and must be signed in all instances.

APPLICATIONS MUST BE SUBMITTED TO THE GUIDANCE DEPARTMENT ON OR BEFORE MARCH 31, 2017

Letters of recommendation may be originals or photocopies on one side of a single sheet of 8.5" x 11" paper signed by the author.

All applications must be properly bound on the left side with hinges or staples in a standard binder or cover. **Elaborate bindings are discouraged.**

The complete application must not exceed 20 (one-sided) pages.

THE APPLICATION MUST BE ARRANGED IN THE ORDER DESCRIBED BELOW:

- I. The Tramuto Foundation Scholarship Fund Application form. Identify appropriate scholastic, extra-curricular, civic activities and year or participation – 1, 2, 3, 4
- II. The applicant shall prepare a statement of 300 words or less setting forth his/her goals and relate how past, present and future activities make the accomplishment of these goals possible. Additionally, and recognizing the mission of the foundation (see website), please describe how your specific life challenge (financial, hardship medical, etc. adversity) made you a more effective leader. (This **MUST** be included to be considered for a scholarship.) The applicant by deed and circumstance must demonstrate his/her worthiness. The statement must be signed.
- III. The parent/guardian may prepare a statement of 200 words or less, summarizing the family's obligations and resources. The statement needs to illustrate the applicant's need for financial assistance and the inability of the family to satisfy these needs. The statement must be signed. The PARENTAL FINANCIAL ANALYSIS form must be filled out.
- IV. Official signed transcript of high school grades, including class rank, SAT and ACT scores.
- V. Current dated signed one-page letters of recommendations from at least two people in authority from high schools attended by the applicant. Letter may cover the applicant's ability, work habits, leadership, personality and integrity.

Eligibility of Applicants

The award will be based equally on scholarship, community service, school activities, character, leadership qualities and demonstrated financial need. Any graduating student from Wells-Ogunquit High School and Fredonia High School who plans to continue post-secondary education is eligible.

IMPORTANT

Before preparing this application, please read the information in the General Instructions of the beginning pages of this application. Only those applications containing all required information will be considered. **Any questions should be directed to your guidance counselor.**

THE TRAMUTO FOUNDATION SCHOLARSHIP POLICIES

- One scholarship for each High School will be awarded annually for \$2,000 for either a four-year or two year course of study.
- Funds will be distributed twice a year. The student will provide a written statement showing his/her intent to continue post-secondary education, including a copy of your academic transcript and admission letter – for each semester.
- If the student should drop out for any reason, the unpaid balance of the scholarship will be forfeited. The scholarship is awarded with no discrimination as to gender, race, creed, religion or national origin.
- As a new requirement to remain active in the Scholarship Program, the Foundation Board of Directors has approved a new policy requiring each recipient to provide at the end of each semester a summary of philanthropic or civic activities you have been actively involved in.
- It is also expected that you will friend the Foundation on Facebook and share your experiences with others.
- **The Board reserves the right to approve no scholarships if no candidates meet the requirements.**

The Scholarship Application

I. Please share with us your contact information:

NAME OF APPLICANT _____
FIRST MIDDLE LAST

HOME ADDRESS _____
STREET ADDRESS

CITY STATE ZIPCODE

PHONE _____ **BIRTHDATE** _____ **BIRTHPLACE** _____

II. Please list below the schools you have attended Grades 9 through 12:

SCHOOL NAME _____ **DATES OF ATTENDANCE** _____

SCHOOL NAME _____ **DATES OF ATTENDANCE** _____

SCHOOL NAME _____ **DATES OF ATTENDANCE** _____

III. Please list the activities you participated in during your attendance:

(Please note specific information such as Captain, President, Officer, or award received)

CLASS OFFICES / STUDENT COUNCIL

	YEAR	9TH	10TH	11TH	12TH

CLUBS / ORGANIZATIONS

	YEAR	9TH	10TH	11TH	12TH

DRAMA / MUSIC

	YEAR	9TH	10TH	11TH	12TH

EXTRA-CURRICULAR ACTIVITIES (OUTSIDE OF SCHOOL)

	YEAR	9TH	10TH	11TH	12TH

GIRL OR BOY SCOUTS, VOLUNTEER WORK, REC PROGRAMS, ETC.

	YEAR	9TH	10TH	11TH	12TH

HONORS / ACADEMIC AWARDS

	YEAR	9TH	10TH	11TH	12TH

PUBLICATIONS, JOURNALISM, SPEECH, ETC.

	YEAR	9TH	10TH	11TH	12TH

ATHLETICS (INCLUDE JV AND/OR VARSITY)

	YEAR	9TH	10TH	11TH	12TH

OTHER

	YEAR	9TH	10TH	11TH	12TH

IV. Parental Financial Analysis

MOTHER'S NAME _____ AGE _____ OCCUPATION _____

ADDRESS _____

FATHER'S NAME _____ AGE _____ OCCUPATION _____

ADDRESS _____

PARENT'S MARITAL STATUS: MARRIED SEPARATED DIVORCED WIDOWED

MOTHER'S ANNUAL INCOME BEFORE TAXES \$ _____

FATHER'S ANNUAL INCOME BEFORE TAXES \$ _____

ALL OTHER TAXABLE OR NON-TAXABLE INCOME NOT INCLUDED ABOVE \$ _____

(INCLUDING PENSIONS, SOCIAL SECURITY, DISABILITY, INTEREST, DIVIDENDS, ETC.) \$ _____

GROSS INCOME (TOTAL OF ABOVE) \$ _____

NUMBER OF DEPENDENTS # _____

NUMBER OF DEPENDENTS ATTENDING COLLEGE IN 2017 / 2018 # _____

PREVIOUS YEAR MEDICAL AND DENTAL EXPENSES, INCLUDING

INSURANCE COSTS NOT PAID BY EMPLOYER \$ _____

EMERGENCY EXPENSES (FLOOD DAMAGE, ETC.) \$ _____

TOTAL MARKET VALUE OF HOME \$ _____

AMOUNT OF UNPAID MORTGAGE \$ _____

DO YOU OWN A BUSINESS? YES NO

IF SO, WHAT IS THE MARKET VALUE \$ _____

ANY UNUSUAL CIRCUMSTANCES? PLEASE EXPLAIN: _____

AMOUNT RESERVED FOR POST-SECONDARY EDUCATION OF APPLICANT \$ _____

APPLICANT'S SAVINGS RESERVED FOR POST-SECONDARY EDUCATION \$ _____

DOES MOTHER OR FATHER HAVE A PENSION PLAN OTHER THAN SOCIAL SECURITY? YES NO

MOTHER'S SIGNATURE: _____ DATE: _____

FATHER'S SIGNATURE: _____ DATE: _____