### 2025 - 2026

# Scholarship Little Compton Application

If you have any questions concerning this application, please contact a committee member:

Amanda Nickerson Toste, President (401) 835-8967 amanda@sakonnethomes.com
Caroline Wilkie Wordell, Vice President (401) 635-2241 cwilkie43@cox.net
Ann Haire, Secretary (401) 635-8915 vahaire@gmail.com
Edward Burnett (401) 269-1335 edwardtburnett@gmail.com
Mary McKinnon Nicole (248) 921-2386 mmnicole@gmail.com
Doreen Medeiros (401) 635-4588 djgm242@aol.com
Joyce Moson (401) 635-2883 joycemoson@cox.net

#### **Directions for Applicant**

Scholarship Little Compton offers scholarships to <u>full-time</u>, <u>year-round</u>, <u>Little Compton</u> <u>residents</u> based on financial needs and academic transcripts. Completing this application will help to decide eligibility for receiving funds set aside to help students who plan to enroll in either a full-time undergraduate degree program, full-time technical or trade certificate program.

Applicants must send all applications materials together by the deadline.

Only applications found to be complete as of the postmarked deadline of April 19, 2025 will be accepted for review.

All parts of the application must be received at the same time.

There will be no exceptions.

Application Due Date: April 19, 2025.

Parts of application:

- 1. Application
- 2. FAFSA (Free Application Federal Student Aid) form including official Student Aid Index (SAI)
- 3. Current Official Transcript of grades

# Scholarship Little Compton Application Information Page 1

## Applicant Personal Information

| Last Name                                       | First Name                  |   | Date of Birth (MM/ DD/ YYYY)              |             |  |
|---|-----------------------------|---|---|-------------|--|
| Legal Address S                                 | Street                      | City                                      | State                                     | Zip         |  |
| Social Security Number                          | Telephone                   |   | Email                                     |             |  |
| Name of Parent(s)/Guardiar                      | n(s)                        | Mailing address (if different from above) |   |             |  |
| Telephone of Parent/Guardia                     | elephone of Parent/Guardian |   | Email of Parent/Guardian                  |             |  |
| School Information                              |                             |   |   |             |  |
| High School Attended                            |                             |   |   |             |  |
| Address   | Teleph                      | one                                       | Email                                     |             |  |
| Post Secondary Data (youndecided at this time.) | u MUST name a sch           | nool you are apply                        | ring to, even if yo                       | u are still |  |
| Name of Post-Secondary Sch                      | nool Street                 | City                                      | State                                     | Zip         |  |
| □ 4-Year College/University □                   | Vocational-Tech □ Cor       | mmunity College  O                        | ther                                      |             |  |
| Major field of study applicant plans to pursue  |                             | Anticipat                                 | Anticipated date of graduation (Month/Yea |             |  |

| Tuition \$   | Enrollment • Less than ½ time • ½ time or more • Full   | Time          |  |  |  |
|--|---|---------------|--|--|--|
| Room and Board \$  | □ Live on Campus □ Live off Campus □ Commute  |               |  |  |  |
| Year in post-secondary progra  | am <u>during the coming year:</u> 1 2 3 4 5 GPA:  | (Required)    |  |  |  |
| Scholarship Little Compton   | Application Signature & Checklist Page 2  |               |  |  |  |
| Certification:   |   |               |  |  |  |
|  | cation, I certify that the information provided is complete a ge. Falsification of information may result in termination o  |               |  |  |  |
| Applicant's Signature _  | Date  |               |  |  |  |
| materials postmarked by All parts of the application of the applicatio | dent aid becomes complete only when you have returned by April 19, 2025. There will be no exceptions.  Son must be sent by the due date.  Solution 1-2) with required signatures  Solution 1-2 anscript of grades  Solution 1-2 anscript of grades  Solution 1-2 anscript of grades | the following |  |  |  |
| Completed application  | must be postmarked by <b>April 19, 2025</b> and delivered to:   |               |  |  |  |
| Scholarship Little   | e Compton   |               |  |  |  |

Little Compton, RI 02837