

NEW ENGLAND SOCIETY in the CITY of NEW YORK  
SCHOLARSHIP INFORMATION SHEET

NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ HIGH SCHOOL GPA: \_\_\_\_\_ INTENDED MAJOR: \_\_\_\_\_

INSTITUTION ATTENDING: \_\_\_\_\_ CLASS: \_\_\_\_\_

PRIOR EDUCATION:

SECONDARY SCHOOL: \_\_\_\_\_ YEAR: \_\_\_\_\_

COLLEGE: \_\_\_\_\_ YEAR: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

COLLEGE & DEGREE: \_\_\_\_\_ YEAR: \_\_\_\_\_

GRADUATE SCHOOL & DEGREE: \_\_\_\_\_ YEAR: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ EST. ANNUAL INCOME: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

COLLEGE & DEGREE: \_\_\_\_\_ YEAR: \_\_\_\_\_

GRADUATE SCHOOL & DEGREE: \_\_\_\_\_ YEAR: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ EST. ANNUAL INCOME: \_\_\_\_\_

BROTHERS/SISTERS	AGE	SCHOOL/COLLEGE
_____	_____	_____
_____	_____	_____
_____	_____	_____

ESTIMATED ANNUAL COST OF EDUCATION

TUITION: \_\_\_\_\_

ROOM & BOARD: \_\_\_\_\_

MISCELLANEOUS: \_\_\_\_\_

FINANCIAL SUPPORT FOR ABOVE EXPENSES

PARENTS/ OTHER FAMILY: \_\_\_\_\_

COLLEGE GRANT: \_\_\_\_\_

LOAN: \_\_\_\_\_

CAMPUS EMPLOYMENT: \_\_\_\_\_

OTHER OUTSIDE AID: \_\_\_\_\_

ACADEMIC AWARDS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EXTRACURRICULAR ACTIVITIES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CIVIC ACTIVITIES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WORK EXPERIENCE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REFERENCE:

NAME	TELEPHONE	RELATION
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1. \_\_\_\_\_

I hereby certify that the information I have submitted as correct. I authorize the release of this information to members of the New England Society Scholarship Committee and will provide additional information or verification upon request.

\_\_\_\_\_  
Signature

*Return form to New England Society, 20 West 44<sup>th</sup> Street, Suite 409, New York, NY 10036*