

The Franco-American Education Foundation Memorial Scholarships

Administered by
The Franco-American Education Foundation

This scholarship is made possible through the generosity of the following benefactors:

- * The Estate of Lucien E. & Georgianna M. Martin
- * The Estate of Maurice F. Hemond
- * The Estate of Rose Couturier
- * The Estate of Albert E. Cote
- * The Estate of Roland A. & Theresa Rodrigue

INCOMPLETE OR LATE APPLICATIONS WILL NOT BE CONSIDERED

Applicants for Scholarships must meet all of the following four requirements:

1. Be of **FRANCO-AMERICAN** heritage.
2. Be a **resident** of **Lewiston, Auburn, Lisbon, Sabattus, Greene, Turner, Minot, Durham or Poland, Maine.**
3. Be about to graduate or have graduated from high school or obtained a GED.
4. Be enrolled as a student in an accredited institution of higher learning.

Applicants must submit the following:

1. A **FULLY COMPLETED** signed application.
2. A **transcript**, including the most recently completed grading period.
3. A photo with your name on back.
4. A letter of recommendation from a teacher, guidance counselor or school principal.
5. An essay detailing and explaining (A) 75% What role your Franco-American heritage has meant to you and how it has influenced your life, (B) 25% your college and career goals.
6. Proper identification a) Photocopy of your valid Maine driver's license or
b) Photocopy of your current school ID card.

Please upload on our website: francoamericanfdn.org, email to francoamericaneducation@gmail.com or mail the completed renewal with its attachments to:

The Franco-American Education Foundation
PO Box 200
Litchfield, Maine 04350-0200

DEADLINE

Applicants are responsible for insuring that the completed application together with all required attachments are received by the Foundation no later than **April 20, 2021.**

Any application or information received after April 20 will not be considered.

RENEWAL

The FAEF scholarships may be renewed for up to 4 years subject to a minimum GPA of 2.5. The sum awarded will be determined each year. This application must be submitted for the first year; a short renewal application form is required for subsequent years.

FINANCIAL INFORMATION (Please Print)

HAVE YOU WORKED WHILE IN SCHOOL, DURING VACATIONS, OR AT OTHER TIMES? _____
IF YES, LIST THE NAME AND ADDRESSES OF YOUR FORMER AND PRESENT EMPLOYERS.

NAME	ADDRESS	EMPLOYMENT DATES

HAVE YOU APPLIED FOR OTHER SCHOLARSHIPS? YES NO
IF YES, LIST BELOW. IF NO, EXPLAIN WHY. _____

COSTS FOR ACADEMIC YEAR		RESOURCES	
TUITION	\$ _____	SCHOLARSHIPS	\$ _____
ROOM & BOARD	\$ _____	PELL GRANTS	\$ _____
TOTAL:	\$ _____	TOTAL:	\$ _____

PARENTAL INFORMATION (Please Print)

MOTHER'S FIRST NAME MAIDEN NAME LAST NAME

HOME STREET ADDRESS CITY STATE ZIP CODE PHONE #

MARITAL STATUS OCCUPATION/PROFESSION

FATHER'S FIRST NAME MIDDLE NAME LAST NAME

HOME ADDRESS CITY STATE ZIP CODE PHONE #

MARITAL STATUS OCCUPATION/PROFESSION

Paternal Grandfather's First Name: _____ Last Name: _____

Paternal Grandmother's First Name: _____ Maiden Name: _____ Last Name: _____

Maternal Grandfather's First Name: _____ Last Name: _____

Maternal Grandmother's First Name: _____ Maiden Name: _____ Last Name: _____

I/WE HEREBY CERTIFY THAT THIS FORM IS COMPLETE AND THAT THE INFORMATION HEREIN IS TRUE TO THE BEST OF MY/OUR KNOWLEDGE AND BELIEF. I/WE UNDERSTAND THAT ANY INFORMATION FOUND TO BE FRAUDULENT OR KNOWIGNLY MISINTERPRETED WILL ELIMINATE THE APPLICANT FROM CONSIDERATION. IF THE SCHOLARSHIP HAS BEEN AWARDED PREVIOUSLY, THE APPLICANT WILL BE REQUIRED TO FUND THE MONIES RECEIVED.

APPLICANT'S SIGNATURE _____

DATE _____

MOTHER'S SIGNATURE _____

DATE _____

FATHER'S SIGNATURE _____

DATE _____