



THE MARK BOICE GERMAIN AND MILDRED BOICE GERMAIN FUND
Academic Year 2011-2012
A college scholarship fund for residents of Conway

This Charitable Trust was established in 1985 under the will of Mark Walter Germain and is known as the “Mark Boice Germain and Mildred Boice Germain Fund.” He directed that this fund be established “...to grant funds to those Conway residents whose parents or guardians cannot afford such child’s college expenses, and any applications that such applicants have made for other private and government scholarships have resulted in an insufficient amount of funds to allow the furtherance of their education without additional monetary support.”

WHO IS ELIGIBLE?

Any resident of Conway who has resided and/or whose parents have resided in Conway for not less than two years prior to the date of application shall be eligible.

WHAT ARE THE EDUCATIONAL REQUIREMENTS?

Anyone seeking to further their education by attending college is eligible to apply. The actual awards will be made by the Conway Board of Selectmen or their designees. The applicant’s need, character, scholastic ability, integrity and civic involvement will be considered in granting awards. Any awards made shall be contingent upon the applicant’s acceptance into the educational program designated, either as a college undergraduate or graduate student.

HOW MUCH ARE THE AWARDS?

Awards to any one student shall be limited to the cost of tuition and textbooks not to exceed \$2500 annually. Any applicant may receive scholarship awards during several years of his/her education. Applicants are required to re-apply each year for consideration.

WHERE DO I APPLY?

Scholarship forms will be available online at <http://www.townofconway.com/forms.asp> as well as at the Frontier Regional School guidance office and the Franklin County Technical School guidance office. Completed applications must be received no later than May 11, 2011. No postmarks. Send your forms to the Conway Selectboard, PO Box 240, Conway, MA 01341.

MAY I RE-APPLY FOR SUBSEQUENT YEARS?

Students may re-apply for each year they meet the educational and financial requirements. See application packet requirements below.

Mark Boice Germain Scholarship
2011-2012 Academic Year
APPLICATION PACKET REQUIREMENTS

1. Completed application packet for Mark Boice Germain Scholarship
2. The following three letters of recommendation are required:
 - a. One letter from either the principal or guidance counselor of the school the applicant is a graduate of and to include size of class and the student's position in that class, and the cumulative grade point average.
 - b. Two letters from adult citizens, other than relatives, attesting to the applicant's character in regard to conduct, citizenship, and leadership.
3. A certified transcript or photocopy of the high school or college grades of the applicant.
4. A copy of ACT, SAT or GRE test scores.
5. Re-application: Students who are re-applying for funding need only to submit the Financial Assistance Questionnaire, a Certificate of Need and a copy of the latest transcript from the college they have been attending. They do NOT need to submit the information in items 2 through 4 above).

RULES

1. The applicant and his/her parents or guardians must have resided in Conway for two years preceding the application.
2. Applicants must be in their senior year of high school, or attending undergraduate or graduate school. Students may re-apply (see #5 above for re-application requirements).
3. The scholarship must be used within fifteen months of the date of award.
4. Applicants must present the completed application to the Selectboard, Town of Conway on or before Wednesday, May 11, 2011. Incomplete applications will not be accepted.
5. The decisions of the judges shall be final.
6. Half the award shall be paid for the first semester upon submission of a bill from the applicant's college. The balance shall be paid upon submission of a second semester bill, but no later than fifteen months following the awarding of a scholarship. The applicant will be reimbursed directly from scholarship funds. This can only occur if the applicant presents documentation that the semester's bill is **paid in full**. The funds will not be sent to the student's school but rather only to them directly.
7. The applicant must return the completed application to:
The Selectboard
Town of Conway,
P.O. Box 240
Conway, MA 01341

Mark Boice Germain Scholarship
Questionnaire
2011-2012 Academic Year

Applicant: (attach additional comments if necessary)

A. Why would receiving this scholarship be important to you? Please explain:

B. What course of study do you plan to pursue and why?

C. Describe your involvement in school or community activities.

D. Academic Institution or Program where scholarship funds will be used:

**Mark Boice Germain Scholarship
Financial Assistance Questionnaire
2011-2012 Academic Year**

A. APPLICANT DATA

- Mr.**
- Ms.**

| | | |
|-----------|------------|----------------|
| | | |
| Last Name | First Name | Middle Initial |

Permanent mailing address: _____

| | | |
|---|--------|--|
| | | |
| # | Street | |

| | | |
|------|-------|-----|
| | | |
| City | State | Zip |

B. INCOME, EXPENSE, AND ASSET DATA FOR THE YEAR OF JANUARY 1 TO DECEMBER 31, 2010. If you are claimed as a dependant please have your parents fill in the following section. They must also indicate whether the information is from:

- A completed tax return – IRS Form 1040 filing date of April 15, 2011.
- Estimates based on current income information to be filed on April 15, 2011.

- | | |
|--|----------|
| 1. Adjusted gross income | \$ _____ |
| 2. Total U.S. income tax paid | \$ _____ |
| 3. Income earned from work by Father | \$ _____ |
| 4. Income earned from work by Mother | \$ _____ |
| 5. Untaxed income and benefits: Social Security, AFDC, ADC, other | \$ _____ |
| 6. Medical/Dental expenses not paid by insurance | \$ _____ |
| 7. Cash, savings, bonds, stocks, checking accounts, CDs, notes, etc. | \$ _____ |
| 8. Total number of exemptions | \$ _____ |

C. ADDITIONAL INFORMATION

Yours or your parents marital status is: single married separated divorced widowed

Total number of family members who will be attending a post-secondary school at least ½ time during the 2011-2012 academic year, including applicant _____

D. CERTIFICATION AND SIGNATURES

Certification: All of the information on this form is true and complete to the Best of my (our) knowledge. If asked by an authorized official, I (we) agree To give proof of the information that I (we) have given on this form. I (we) realize that this proof may include a copy of my (our) 2010 U.S. and/or state income tax return. I (we) also realize that if I (we) do not give proof when asked, the student may not get aid.

Applicant's Signature

Father's / Mother's Signature

Date Completed: Mo. Day Year

Mark Boice Germain Scholarship
Certificate of Need
2011-2012 Academic Year

Applicant:

Certificate of Need

I (We) understand that the Mark Boice Germain Scholarship is only available to those students truly in need. I (we), as guardians or parents of the applicant / as the applicant, cannot afford the expenses for the education of our child / myself in excess of any amounts which he or she / I will receive from other government scholarships or loans and other private scholarships and our child / I cannot continue the furtherance of his or her / my education without financial assistance.

Applicant's Signature

Father's Signature

Mother's Signature