# A logo with white text Description automatically generated James Foley Scholarships Application

## Guidelines

### History and Purpose

This application is for two funds held by the Maine Community Foundation to benefit nursing students.

**James Foley Scholarship Fund**

The James Foley Scholarship Fund provides renewable scholarship support to second, third-, and fourth-year nursing students with financial need who live in Maine. There is a preference for those who reside in Washington County, are adult learners, and maintain a grade point average of at least a B.

### Eligibility

Maine residents who will be entering their second, third- or fourth year of post-secondary study in nursing. See purpose, above, for further criteria.

### Administration

**All applications must be postmarked no later than June 15.** Incomplete applications or those postmarked after this date will not be processed. All information received from applicants will be treated as confidential.

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| --- | --- | --- |
| **Questions:** | **Submission Deadline:** | **Submission Address:** |
| **Lubec Community Outreach Center** jbristol@lubecoutreach.org | **June 15** | **Lubec Community Outreach Center** PO Box 41  Lubec, ME 04652  **Or email**  jbristol@lubecoutreach.org |

### Scholarship-Specific Information

|  |  |
| --- | --- |
| **Student is a resident of Washington County, Maine (preference, not requirement)** | ☐ Yes ☐ No |
| **Student is a 2nd, 3rd, or 4th year nursing student (required)** | ☐ Yes ☐ No |
| **Letter of Recommendation** | A signed letter of recommendation from a current professor specific to the criteria of this scholarship. The letter must be current (dated after September 1 of the current academic year), on official letterhead, contain your first and last name, and be signed by the writer, who must identify his/her relationship to you (not a family member). |

### Personal Statement

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| --- |
| **In 500 words or less, describe your nursing aspirations and how you plan to focus your educational plans. Also, please note any personal or family circumstances that you feel make you particularly eligible for a scholarship. Please attach as a separate sheet.** |

### Certifications

I certify that I am a legal resident of the State of Maine and that all information on this form is true and complete to the best of my knowledge. I understand that I may be asked to provide proof of information stated on this form, including a copy of my parent's and/or my prior year's U.S. Income Tax return.

In addition, I hereby authorize the college I will attend in the school year to release information on financial aid awarded to me by the college and other sources to the Maine Community Foundation.

**Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### Application Checklist

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| --- | --- |
| **Please review this list and make sure you have taken care of all required parts, including attachments listed.** | ☐ **Maine Community Foundation scholarship application** *(attach)*  **☐ Scholarship-specific information** *(complete above)*  **☐ 500-word personal statement in business letter format** *(attach)*  **☐ Letter of Recommendation** *(attach)*  ☐ **Most recent transcript. An unofficial transcript is acceptable.** *(attach)*  ☐ **Copy of college financial aid offer** *(attach)* |

Maine Community Foundation Scholarship Application

**Important Note:** This application must be completed with all required documentation. Incomplete applications will not be considered.

### Scholarship Name

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| --- | --- |
| **Name of MaineCF scholarship:**  *Indicate which scholarship for which you are applying.* | **James Foley Scholarship Fund** |

### Applicant Details

|  |  |
| --- | --- |
| **Applicant’s full name:** |  |
| **Applicant’s date of birth:** |  |
| **Applicant’s gender:** | ☐ Male ☐ Female ☐ Non-binary ☐ Prefer not to disclose |
| **Full mailing address:** |  |
| **Phone number:** |  |
| **Email address:** |  |

### Academic Details

|  |  |  |  |
| --- | --- | --- | --- |
| **Current school’s name:** |  | | |
| **Current school’s address:** |  | | |
| **Class size:** |  | **Class rank/standing:** |  |
| **Latest SAT score, math:**  *Optional.* |  | **Latest SAT score, verbal:**  *Optional.* |  |
| **Grade Point Average (GPA):** |  | | |
| **Upcoming year in school:** | ☐ 2 ☐ 3 ☐ 4 | | |
| **School/program name:** |  | | |
| **Degree and year anticipated:** | ☐ associate’s degree ☐ BA ☐ BS ☐ Other (note, this scholarship does not cover graduate study): **Year:** | | |
| **Major/field of study:** |  | | |

### Activities

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **School activities:** *Include name of activity, number of years participated and any special honors or offices for each. Attach additional sheet if necessary.* | *Activity* | *Years* | | *Special honors/offices* | |
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| **Community activities:** *Attach additional sheet if needed.* | *List community activities* | | | | |
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|  | | | | |
| **Work experience:**  *Include position held, period of employment and hours per week for each. Attach additional sheet if needed.* | *Position* | *Start date* | *End date* | | *Hours/week* |
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### Family Information

|  |  |  |  |
| --- | --- | --- | --- |
| **Who is responsible for your support?** | ☐ Mother ☐ Father ☐ Both ☐ Myself ☐ Other: | | |
| **Who do you live with?** | ☐ Mother ☐ Father ☐ Both ☐ Myself ☐ Other: | | |
| **Number in household:**  *Include parents.* |  | **Number of family members attending college next academic year:** |  |

**Financial Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Family contribution:** | $ | **Tuition:** | $ |
| **Individual contribution:** | $ | **Room:** | $ |
| **Contribution from employment:** | $ | **Board:** | $ |
| **Scholarships and grants:** | $ | **-** | - |
| **Total resources:**  *Add lines above.* | $ | **Total expenses:**  *Add lines above.* | $ |
| **Amount short:**  *Subtract total expenses from total resources.* | $ | | |

|  |
| --- |
| **Reminder:** In addition to this application, you must complete **all** requirements for the scholarship for which you are applying. Incomplete applications will not be accepted. For scholarship-specific requirements, please visit: [www.mainecf.org/scholarship-applications](http://www.mainecf.org/scholarship-applications) |