



WESTFORD ACADEMY  
F.S. HEALY AMERICAN LEGION POST 159  
SCHOLARSHIP APPLICATION

Applicant's Name:
Address:
Telephone No.

List College Acceptances:

1.	2.
3.	4.
5.	6.

College you expect to attend:

--

Family Information:

Father: \_\_\_\_\_

Employed By: \_\_\_\_\_

Gross Income: \_\_\_\_\_

Mother: \_\_\_\_\_

Employed By: \_\_\_\_\_

Gross Income: \_\_\_\_\_

Total Number of persons dependent on parents (Include Self)


Applicant's Employment History (While in High School):


List money you have received through grants and/or other scholarships:


List Honors and Awards you have received:


List your extra-curricular activities during high school:


Special family circumstances: (Describe Briefly)


Family Affiliations if applicable: (Veterans, Firefighters, Police Officers)


Brief statement about your future plans:


If you have, how did you participate in Veterans or Memorial Day?


Brief Statement of what a veteran means to you:
