

Hanover Township

Memorial Golf Tournament



SCHOLARSHIP APPLICATION

Purpose of the Scholarship:

To provide ongoing funds for post-secondary education to graduating seniors and current post-secondary students who have lost a parent and are residents of Hanover Township, Northampton County.

Selection of Scholarship Recipients:

Scholarships are awarded on an objective and nondiscriminatory basis, using an application process administered by a Selection Committee comprised of residents of Hanover Township and other community members. Eligibility and award amounts are at the sole discretion of the Selection Committee. Scholarships will be awarded to those applicants who best meet the requirements set forth by the Selection Committee.

Guidelines for Scholarship Program:

Scholarships are open to graduating high school seniors and students currently enrolled at any college or university. Scholarship monies will be paid directly to the educational institution in the student's name, and scholarship awards are limited to cover qualified educational expenses including (1) tuition and fees required for enrollment, or (2) fees, books, supplies and equipment required for courses of instruction.

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All applications must be received no later than May 31 of the year preceding the scholarship award for the applicant's Fall college semester.

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Chairman, HTMGT
c/o TDE
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Bethlehem, PA 18017
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Email - tdonnelly@tdebusinessinfo.com

INSTRUCTIONS:

1. Please print your answers and answer all questions; use N/A to indicate not applicable.
2. The application form can be found on the HTMGT website at htmgt.org.
3. Attach additional pages if necessary.

HTMGT SCHOLARSHIP APPLICATION FORM

General Information

Name and Date of Birth	_____	_____	_____
	Last	First	Date of Birth
Home Address			
Telephone No(s) and Email	_____	_____	_____
	Home Tel.	Cell Phone	Email

Family Information

(please include name of deceased parent who is being remembered through the HTMGT scholarship)

Parent(s) Names	
Home Address	
Sibling(s) and Age(s)	

High School

Name	
GPA	
Extracurricular Activities (sports/clubs/student gov./etc.)	
Anticipated Graduation Date	

College/University

(please note school where here you have been accepted to and are attending in the Fall)

Name	
Bursar's Address	
Anticipated Graduation Date	
Notes/Additional Info.	

Applicant's Signature: _____

Date: _____