

## Application for Scholarship Aid

Date: \_\_\_\_\_

To the Unitarian Universalist Women of Greater Lynn  
Unitarian Universalist Church of Greater Lynn:

A. I \_\_\_\_\_ of \_\_\_\_\_  
Name Address

\_\_\_\_\_ apply for scholarship assistance.  
Date of Birth

B. For \_\_\_\_\_ Year \_\_\_\_\_  
School or College

C. Number of dependents of parent or guardian \_\_\_\_\_  
Give age(s) of children

D. Approximate gross family income  
Father \_\_\_\_\_  
Mother \_\_\_\_\_  
Other \_\_\_\_\_ Total \$ \_\_\_\_\_

E. Expense budget for school years: \$ \_\_\_\_\_  
(itemize tuition, books, room,  
board, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL EXPENSE BUDGET \$ \_\_\_\_\_

F. Maximum assistance you can count on  
from family sources \$ \_\_\_\_\_

Other scholarships or income sources \_\_\_\_\_

Applicant's estimated savings \_\_\_\_\_

TOTAL INCOME FOR EDUCATION \$ \_\_\_\_\_

G. AMOUNT REQUIRED TO BALANCE BUDGET \$ \_\_\_\_\_

H. Attach transcript of high school marks. (If already in  
college, attach a transcript of last year's marks.)

I. Date of acceptance by school or college \_\_\_\_\_

Approved \_\_\_\_\_  
Parent or Guardian Applicant's signature

\_\_\_\_\_ Telephone \_\_\_\_\_  
Address

**PLEASE RETURN BY JUNE 28, 2020 TO:**

**Joanne Brine  
UU Women of Greater Lynn  
4 Lake View Place  
Lynn MA 01904**