



New England Promotional Products Association Scholarship Program

Applications and documentation must be postmarked or
emailed by APRIL 30, 2024.

Please type or print legibly.

STUDENT APPLICANT INFORMATION

Name _____ Date of Birth _____
Home Address _____
City _____ State _____ Zip Code _____
Phone _____ Email Address _____

NEPPA MEMBER COMPANY INFORMATION

NEPPA Member Company Name _____
Address _____ City _____ State _____ Zip Code _____
Phone _____

PARENT OR GUARDIAN INFORMATION

Employee Name _____
Phone _____ Email Address _____
Date of Hire _____ Relationship to Applicant _____

HIGH SCHOOL INFORMATION

School Name _____ High School Graduation Date _____
City _____ State _____ Phone _____

POST-SECONDARY SCHOOL INFORMATION

List schools to which you have applied – indicate “plan to attend” if known; or indicate the college you currently attend.

City/State _____

City/State _____

City/State _____

☐ 4-year College/ University ☐ 2-year Community/Jr. College ☐ Vocational/Technical School ☐ Graduate School

Major Field of Study _____

Year in college NEXT YEAR (1st, 2nd, etc.) _____ College Graduation Date (Month/Year) _____

Student Applicant Name _____

Attach a separate sheet to complete this section, if needed. Include your name on each.

GOALS AND CAREER OBJECTIVES

Brief summary of your goals and career objectives as related to your education

SCHOOL ACTIVITIES AND HONORS

School activities, offices, awards, honors and distinctions during the last 4 years – include year(s) for each

COMMUNITY ACTIVITIES

Projects, community contributions and accomplishments during the last 4 years – include year(s) for each

ADDITIONAL INFORMATION FOR CONSIDERATION

Any unusual circumstances you feel the committee should be aware of when considering your application

Student Applicant Name _____

TRANSCRIPT / APPRAISAL

The following documentation must be included with your application or sent separately in addition to the application:

High School Seniors:

- ☐ Transcript of Grades
- ☐ A letter of recommendation from a counselor, advisor, instructor

Students Currently Enrolled in College/Vocational-Technical School:

- ☐ College/Vo-tech Transcript of Grades from each school attended
- ☐ A letter of recommendation from a counselor, advisor, instructor

CERTIFICATION

The NEPPA Scholarship Committee will select recipients based on the information included in this application and the criteria as stated in the scholarship program description; decisions are final. Incomplete applications will not be reviewed.

I certify that I meet all eligibility requirements, that all information is true and accurate and that I will provide proof of information, if requested. Falsification of any information will disqualify this application and terminate any award granted.

Student Applicant's Signature (or type)

Employee's (Parent/Guardian) Signature (or type)

Date _____

Date _____

APPLICATION SUBMISSION - Mail or Email

MAIL: Application and documentation may be mailed to the address below and must be postmarked by **APRIL 30, 2024.**

NEPPA Scholarship Program
368 NH Route 11 #214
Farmington, NH 03835

EMAIL: Application and documentation may be submitted by email and must be received by **APRIL 30, 2024.**

Include: NEPPA Scholarship Program and your name in the subject line.

Email: info@neppa.com