

CONNECTICUT PARKS ASSOCIATION, INC.

DENNIS MALONE MEMORIAL SCHOLARSHIP

NAME:	PHONE:		
ADDRESS:			
(Street, City/Town, State, Zip Code)			
E-MAIL:			
High School Attended:	LOCATION:		
Grade Point Average:	Class Rank:		
I have applied to these colleges: (list in order of preference, check if planning to attend)	Intended course of study		
I have already been awarded scholarship aid from these source	es (list amounts):		
	\$		
	\$		
I expect to finance my first year of college in the following man	ner:		
Personal Savings: <u>\$</u>	Other: <u>\$</u>		
I expect to earn this summer: <u>\$</u>			
Does your family have any unusual financial burdens or respor If yes, please explain:	nsibilities at present, i.e. extensive illness, disability, etc.?		

Has your family had any unusual financial burdens or responsibilities in the past five years? If yes, please explain:

Father's Occupation and Title:		
Employed by:		Years with firm
Contact:		Phone:
Mother's Occupation and Title:		
Employed by:		Years with firm
Contact:		Phone:
Please check the range of family	gross income:	
() \$10,000-\$19,999 () \$35	,000-\$34,000 () \$50,000-\$59,999 ,000-\$39,999 () \$60,000-\$69,999 ,000-\$49,999 () \$70,000-\$79,999	() \$90,000-\$99,999
Student's Activities (school and/	or community - please attach your res	ume).
Student's Activities (school and/	or community - please attach your res	ume).
Student Employment:	or community - please attach your res	ume).
Student Employment:		
Student Employment: Employer #1: Hours worked:	Days per week:	Dates employe
Student Employment:		Dates employe
Student Employment: Employer #1: Hours worked:	Days per week:	Dates employe
Student Employment: Employer #1: Hours worked: Brief description of duties:	Days per week:	Dates employe
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Student Employment: Employer #1: Hours worked: Brief description of duties: Student Employment:	Days per week:	Dates employe

Name Title Address Phone	Additional comments that will a	aid the scholarship comm	ittee:	
Name Title Address Phone				
Name Title Address Phone				
Name Title Address Phone				
Name Title Address Phone				
Name Title Address Phone				
Please attach a brief essay about the course of study you will be in, how you chose it, and what career goals you have. Applicant's Signature:				
Please attach a brief essay about the course of study you will be in, how you chose it, and what career goals you have. Applicant's Signature:	Please list three individuals, ot	her than family, who can	provide references as to your chara	cter and abilities:
Applicant's Signature:	Name	Title	Address	Phone
Applicant's Signature: I know and approve of this application by my son/daughter for one of the scholarships. Signature: Print name:				
Applicant's Signature: Date:				
I know and approve of this application by my son/daughter for one of the scholarships. Signature: Date: Print name:				
I know and approve of this application by my son/daughter for one of the scholarships. Signature: Date: Print name:	Please attach a brief essay ab	out the course of study yo	ou will be in, how you chose it, and y	what career goals you have.
I know and approve of this application by my son/daughter for one of the scholarships. Signature: Date: Print name:				
I know and approve of this application by my son/daughter for one of the scholarships. Signature: Date: Print name:	Applicant's Signature:		Date:	
Signature: Date:	******	*****	******	*******
Signature: Print name:				
Print name:	I know and approve of this app	lication by my son/daugh	ter for one of the scholarships.	
	Signature:		Date:	
Relationship to Applicant:	Print name:			
	Relationship to Applicant:			