

THE DOVER FOUNDATION SCHOLARSHIP APPLICATION PARENT(S) OR GUARDIAN(S) CONFIDENTIAL STATEMENT



In making its scholarship decisions, The Dover Foundation considers many factors, including the financial need of its applicants. Though demonstrated need is not required for a scholarship award, and without asking for precise financial accounting, we would like you to explain any financial considerations/needs you believe we should be aware of which are pertinent to your child's scholarship application. **All information you provide us will be kept strictly confidential.**

All applications are due by April 15th each year.

Today's Date:

Your Name(s):

Student's Name:

Student's Date of Birth:

Student's Home Address:

Student's Cell No.:

Student's Email:

Parent(s)/Guardian(s) Cell No.:

Parent(s)/Guardian(s) Email:

Student's High School:

College/University the student will be entering (include address):

Will student commute OR be in residence?

Financial need is a factor, but not the sole factor, in determining eligibility for a scholarship.

Did your child apply for financial aid? (yes or no)

How much do you anticipate contributing to your child's first year of college expenses?

First year of college costs:

Tuition.....	\$	Room.....	\$
Board.....	\$	General Fees (required of all students).....	\$
Other (unusual expenses).....	\$		

Explain Other Expenses:

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Student's Name:

Today's Date:

In the space below, please provide us with any additional information that you would like us to have in considering your child's application:

Parent(s) Or Guardian(s) Signature(s): _____

SUBMIT TO:

The Dover Foundation Scholarship, PO 69, Dover, MA 02030

Or

email to: applications@thedoverfoundation.org

Please submit this form with the student's application.