

**Matthew Sheehan  
Memorial Foundation**  
PO Box 5243  
Wakefield, RI 02880  
  
foundation@msmf28.org  
  
www.msmf28.org

## **Matthew Sheehan Memorial Foundation 2026 SCHOLARSHIP APPLICATION**

The Matthew Sheehan Memorial Foundation is a non-profit organization established in the memory of Matthew Sheehan, an inspiring young man from South Kingstown, RI, who died on July 30, 2019, at the age of 28. He excelled academically and volunteered with kindness and compassion in numerous community service projects. In his humble way, Matthew so easily served others. The MSMF seeks to continue Matthew's legacy by awarding college scholarships to high school seniors to help support continuing education.

In 2026 the Foundation will award 2 non-renewable scholarships in the amount of \$2,000 each. The applicant must be a senior student residing in the town of South Kingstown who attends South Kingstown High School or The Prout School, and best exemplifies Matthew's qualities and commitment to academic excellence and community service. Applicants should have maintained a "B" average or better and demonstrate a strong commitment to community service.

**Applicants must complete the attached application by April 20, 2026.**

(Late applications will not be accepted)

Please mail to:

Matthew Sheehan Memorial Foundation  
P.O. Box 5243  
Wakefield, RI 02880

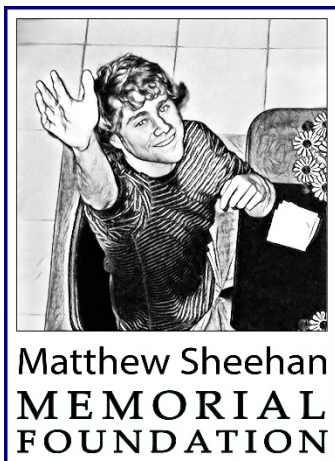
Please provide the following information:

1. Matthew Sheehan Memorial Scholarship Application (page 2)  
*(all sections must be completed for the application to be considered)*
2. High School Transcript(s)
3. Essay: Describe how you demonstrate Matthew's qualities of humility, kindness, and patience in your life, and how you will carry on his legacy of compassionately serving others in your future. (two page maximum)
4. Signed permission for Use/Release (page 3)

**PLEASE DO NOT USE STAPLES WITH THE APPLICATION DOCUMENTS**

*All information provided is confidential and for the exclusive use of the  
Matthew Sheehan Memorial Foundation Scholarship Committee.*

**KINDNESS + COMPASSION X LOVE = MATTHEW SHEEHAN**



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# Matthew Sheehan Memorial Foundation

## SCHOLARSHIP APPLICATION

**APPLICATION FORM**  
 Please fill in fields, print, and sign.

Student Name:	
Address:	
Home/Cell Phone:	
E-mail Address:	
High School:	
College you will (or hope to) attend:	
Tuition:	
Room/ Board:	
Major:	
List of School & Community Activities:	
Date:	
Student's Signature:	
Parent/Guardian's Signature:	

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**MEMORIAL  
FOUNDATION**

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## **PERMISSION FOR USE/RELEASE**

For good and valuable consideration, the receipt of which is hereby acknowledged, the Matthew Sheehan Memorial Foundation (MSMF), its legal representatives, successors and assigns, and all persons or business entities acting with its permission or upon its authority, and all persons or business entities for whom it is acting including, but not limited to, its public relations firm and any print or audio or visual media (newspaper, television, radio, etc.) is and are hereby authorized to take photographs (still or moving) of me or in which I may be included, and to publish the same for any lawful purpose.

I also grant unrestricted permission to the MSMF, and to the persons or business entities referenced above, to use, display, or publish my name, my school and grade, my hometown and any other information relating to the scholarship I have been awarded.

I release and agree to hold harmless the MSMF and the above-referenced persons and business entities from any liability by virtue of any use whatsoever, whether intentional or otherwise, that may occur or be produced in the taking of the above-referenced photographs or the publishing of the information referenced herein.

### **STUDENT SECTION:**

Notary Signature	Student Signature	Date
Comm. #	Student Printed Name	
Comm. Expiration Date	Student Address	

### **PARENT/GUARDIAN SECTION:**

Notary Signature	Parent/Guardian Signature	Date
Comm. #	Parent/Guardian Printed Name	
Comm. Expiration Date	Parent/Guardian Address	

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