NH CHAPTER UPMA SCHOLARSHIP APPLICATION

ELIGIBILITY: Sons, daughters & Grandchildren of NH UPMA Chapter member (Active, retired or deceased) Postmasters and Managers.

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	circle one) Active, retired	or deceased	
	Application informa	ation	
NAME:	BIRTH DATE:		
ADDRESS	:		
CITY:	STATE:	ZIP CODE:	_
TELEPHONE:	E-MAIL:	:	_
HIGH SCHOOL:		GRADUATION DATE:	_
CITY	STATE:	ZIP CODE:	_
		ing Accepted)	-
CITY:	STATE:	ZIP CODE:	-
MAJOR FIELD OF STU	JDY:		-
	Application Requires	ments:	
Please attach a list of all extracurricul organiza	lar activities stating the yeations, all honors, awards		de community
Attach a personal statement on why yo	ou feel you should be consi letter of recommend		inclose one (1)
Enclose transcripts from High School ((four years)and SAT score ipts as well as high school	- C	nclude college

Applications MUST be postmarked by April 1, 2024 and sent to:

SPECIAL NOTE: If you are applying for a second time, please be sure that your information and recommendation are up to date. (no later than two years)

NH UPMA Scholarship Committee C/O Jeana Woodbury PO Box 1 Hinsdale NH 03451 d sent to:

Please include a photo with your

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application so we can our newsletter.

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Thank you!