

# HHS – BMHS Alumni Association

PO Box 8, N. Billerica Ma 01862

## 2026 Scholarship Award Application

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Cell Number: \_\_\_\_\_ Email address: \_\_\_\_\_

**Please provide an email address other than your school address in case we need to contact you.**

Parents Name, phone # and email address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What college(s) have you been accepted to, and plan to attend:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your course of study? \_\_\_\_\_

Have any of your parents, grand-parents or great-grandparents graduated from either Howe High or Billerica Memorial High School? (Circle one) Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide us with their full name (include maiden name) at the time of graduation and year of their graduation: \_\_\_\_\_

---

*Please return this application with the following:*

- Your high school transcript.
- Your activity sheets. (see attached) (Resume' is optional)
- A typed essay, with no less than 100 words. Please share with us your plans, goals, your philosophy, beliefs or a very important person or event that influenced or shaped your life for this very important time in your life.

Your application will be rated on the above items.

- These scholarships will be announced at the BMHS Senior Award Night May 27th, and formally handed out at the Alumni Banquet on Saturday, June 6, 2026.
- To receive this award, you **MUST** attend the Alumni Banquet on June 6, 2026. Our banquet will be held at the BMHS High School Gym. Check our website for more information on the banquet.
- Please keep updated on our website for all updates and changes: [bmhsalumni.org](http://bmhsalumni.org)

**APPLICATION DUE DATE IS April 17, 2026: Must be postmarked 4/17/2026.**

Contact person: Betty Patriquin 978-994-6463 Please email us to make sure your application has been received.

E-MAIL ALL APPLICATIONS TO: [billericaalum@gmail.com](mailto:billericaalum@gmail.com)

Or mail to:

HHS – BMHS Alumni Association

Scholarship Application

P.O. Box 8

No. Billerica, MA 01862-0008

# HHS – BMHS Alumni Association

PO Box 8, N. Billerica Ma 01862

Please fill out the following activity sheet, be thorough and provide specific information with year(s).  
EXAMPLE: Football 9, 10, 11 Captain 12; Member of School Council- 11 & 12, Class President 12.):  
If you attach a resume' to this package please state so on this sheet. Please. Give us as much  
information on yourself, we do accept resumes with this application.

## **Activity Sheet**

Name of applicant: \_\_\_\_\_

Extra curriculum activities (sports, band, clubs, etc. - Please include name and years.)  
\_\_\_\_\_  
\_\_\_\_\_

Awards (sport awards, scholastic awards, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

High School Work Experience (list work and approximate hours)  
\_\_\_\_\_  
\_\_\_\_\_

Community/Volunteer Service (church, school, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Leadership, please explain  
\_\_\_\_\_  
\_\_\_\_\_

Hobbies  
\_\_\_\_\_  
\_\_\_\_\_

Contribution to Family  
\_\_\_\_\_  
\_\_\_\_\_