



Thomas M. Menino, Mayor of Boston

CITY OF BOSTON SCHOLARSHIP FUND

RENEWAL APPLICATION FOR CURRENT RECIPIENTS

INSTRUCTIONS:

Verify eligibility, review checklist and complete signature on the cover sheet. Submit complete application package no later than April 1, 2011. Mail to: Scholarship Fund, P.O. Box 9715, City Hall Plaza, Boston, MA 02114.

Guidelines for Eligibility

I affirm that I meet the following criterion for eligibility:

- I have been a legal resident of Boston for at least two years as of January 1, 2011.
- I plan to enroll as a full time student in a two or four year accredited post-secondary institution within Massachusetts in the upcoming school year.
- I have maintained a 3.0 grade point average.

Checklist

I have provided the following required application materials:

- A complete City of Boston Scholarship Fund Application. Either enclosed or emailed to COBScholarship@cityofboston.gov. If you have already submitted your application via email, it is not necessary to include an additional copy here.
- Most recent 1040 tax returns
- Student Aid Report (SAR)
- 2011-2012 financial aid package from the college you attend (including total scholarships, grants and loans already secured). If you do not know the amount of financial aid you will be receiving from your school, please write a letter explaining the circumstances. If you have financial aid information from the previous year, please provide that so the Scholarship Committee can have an idea about what your financial aid will be like for the upcoming academic year.
- A college transcript with latest semester grades and cumulative grade point average.

Signature

Name: _____

Signature: _____ Date: _____

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INSTRUCTIONS:

1. Open the document in Microsoft Word and type the information requested into the gray areas. These fields will expand to fit as much text as you put in. Be sure to answer all the questions.
2. Once you have filled out all fields, save a copy to your computer.
3. Email the completed form to COBScholarship@cityofboston.gov.
4. After submitting your application, print cover sheet and follow instructions for submitting required application materials by mail.

Applicant Information

Full Name: _____ **Number:** _____
Last First M.I. Internal Use Only

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Home Phone: () - _____ **Date of Birth:** / /

Cell Phone: () - _____ **Place of Birth:** _____
City State Country

E-mail: _____

Race or Ethnic Group (optional):

- Are you a citizen of the United States?** YES NO AMERICAN INDIAN LATINO
- Are you a permanent Alien Resident?** YES NO AFRICAN AMERICAN OR BLACK WHITE
- ASIAN OR PACIFIC ISLANDER
- Gender (optional):** MALE FEMALE OTHER

College

School Name: _____ **Expected Graduation:** _____ **Major:** _____

Financial Data

A. Estimated Educational Cost	_____	\$
B. Living Expenses (Room and Board)	_____	\$
C. Total Expenses (A plus B)	_____	\$
D. Family Contribution to Expenses	_____	\$
E. Scholarships, Grants, Loans and Other Sources	_____	\$
F. Total Support (D plus E)	_____	\$
G. Calculate Financial Need (Subtract F from C)	_____	\$