



# Reading Scholarship Foundation INC.

A Chapter of Dollars for Scholars  
POST OFFICE BOX 492 / READING, MASSACHUSETTS 01867

December 2008

Dear Applicant:

The Reading Scholarship Foundation Inc. (RSF) provides financial assistance to selected students who are continuing their full-time education. The amount of these awards is determined primarily on the basis of need. The applicant's, as well as the family's, financial resources are considered in this decision. Financial information is analyzed by DOLLARS for SCHOLARS®, a program of Scholarship America<sup>SM</sup>, formerly Citizens' Scholarship Foundation of America, using information you provide to them based on the attached Financial Assistance Questionnaire (FAQ). The eligibility requirements for RSF are on the first page of the attached Student Application.

If you are now in...	Then you need to...
<p><b>High School</b></p>	<ol style="list-style-type: none"> <li>1. Complete Parts I, II, and IV of the attached Student Application and mail them to the address on the Student Application</li> <li>2. Complete the attached Dollars for Scholars Financial Aid Questionnaire (FAQ) and send it with a \$5.00 processing fee to the address on the FAQ form.</li> </ol> <p><b>The application and FAQ must both be postmarked no later than Friday, March 6, 2009.</b></p>
<p><b>College</b></p>	<ol style="list-style-type: none"> <li>1. Complete Parts I, III, and IV of the attached Student Application</li> <li>2. Copy last year's financial aid award letter from the school you attended</li> <li>3. Mail Parts I, III, and IV of the Student Application and the copy of your financial aid letter to the address on the Student Application</li> <li>4. Complete the attached Dollars for Scholars Financial Aid Questionnaire (FAQ) and send it with a \$5.00 processing fee to the address on the FAQ form.</li> </ol> <p><b>The application and FAQ must both be postmarked no later than Friday, March 6, 2009.</b></p>

Additionally, high school seniors and college transfer students will need to complete an Application Supplement. RSF will mail the Application Supplement in April 2009. Applicants need to complete and postmark the Application by the date indicated on the Application Supplement.

Applications that do not meet the requirements, appropriate fee payments, or deadlines will be rejected. All information submitted to RSF and Scholarship America<sup>SM</sup> is held in strict confidence. Applications are numbered upon receipt and all family names are deleted to assure anonymity.

The Awards Committee will carefully review all the information supplied in the application, together with the results of the FAQ. This will include any special family or business circumstances you include with the application. The Awards Committee will notify all applicants by mail when a decision has been made concerning their application.

Sincerely,

Marcia Toomey and Emily C. Keily  
Awards Co-Chairs

P.S. \*\*You should retain a copy of this entire application for your own record

# READING SCHOLARSHIP FOUNDATION INC. STUDENT APPLICATION

## ELIGIBILITY AND COMPLETED APPLICATION REQUIREMENTS

- A Reading resident who is currently a high school senior, college freshman, sophomore, or junior.
- Any non-Reading resident who is a senior at Reading Memorial High School and has been enrolled as a full-time student for a period of at least three years.
- The appropriate three pages of the Student Application must be completed and mailed to:  
 Reading Scholarship Foundation Inc.  
 Attention: Awards Committee  
 PO Box 492  
 Reading, MA 01867  
 web: [www.readingsf.org](http://www.readingsf.org)  
 email: [scholarships@readingsf.org](mailto:scholarships@readingsf.org)
- The Student Application **must be postmarked no later than Friday, March 6, 2009.**
- All high school seniors and college transfer students are required to complete an Application Supplement, showing their final college selection. The Application Supplement will be mailed to you by RSF in April 2009 and must be returned to RSF by the date cited in the Application Supplement.
- The Financial Assistance Questionnaire (FAQ) must be completed. A processing fee of \$5.00 is required. A check made payable to Scholarship America<sup>SM</sup> should be mailed along with the FAQ to:  
 Scholarship America  
 PO Box 297  
 St. Peter, MN 56082
- The FAQ **must be postmarked no later than Friday, March 6, 2009.**
- College students **must** submit a copy of their financial aid award letter for the 2008-2009 academic year.

### PART I: CONFIDENTIALITY STATEMENT

This section of the application is for identification purposes only. The Awards Committee will NOT have access to this page. To assure complete objectivity, your application is assigned a control number. DO NOT write your name or anyone else's name on any of the other pages of this application. Please write legibly.

APPLICANT'S NAME: \_\_\_\_\_ TEL. NO. \_\_\_\_\_ - \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PARENT'S/GUARDIAN'S NAME: \_\_\_\_\_

### STATEMENT OF PARENT OR GUARDIAN AND APPLICANT

I agree that if I am offered and accept an award from Scholarship America<sup>SM</sup> or an affiliated program, Scholarship America<sup>SM</sup> and its affiliated programs may use my name, the name of my community, the name and address of my school, the amount of the award, and the name of the postsecondary institution I will attend (my "Recipient Information") in press releases, public announcements, and other fundraising or promotional materials in all media (including the Internet), to advance the non-profit objectives of Scholarship America<sup>SM</sup> and its affiliated programs.

We declare to the best of our knowledge the information reported on this form is true and complete. We further agree to provide any verifying information, including U. S. Income Tax Returns, upon the request of either Scholarship America<sup>SM</sup> or Reading Scholarship Foundation Inc.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**READING SCHOLARSHIP FOUNDATION INC.**  
**STUDENT APPLICATION**

**NOTE:** Use the reverse side of this sheet should you require additional space.

**PART II: ONLY HIGH SCHOOL SENIORS COMPLETE THIS SECTION**

1. What high school are you currently attending? \_\_\_\_\_

2. What is your first choice of college for which a scholarship is requested?  
\_\_\_\_\_ City & State: \_\_\_\_\_

• Acceptance Status: Accepted: \_\_\_\_\_ Pending: \_\_\_\_\_

• Housing Status: Commuter: \_\_\_\_\_ Resident: \_\_\_\_\_

3. Work Experience:

<i>TYPE OF WORK</i>	<i>EMPLOYER</i>	<i>DATES OF EMPLOYMENT</i>

**NOTE:** High school seniors will also be required to complete an Application Supplement, showing their final college selection. The Application Supplement will be mailed by RSF in April 2009 and must be returned to RSF by the date found in the Application Supplement.

**READING SCHOLARSHIP FOUNDATION INC.  
STUDENT APPLICATION**

**NOTE:** Use the reverse side of this sheet should you require additional space.

**PART III**

**ONLY COLLEGE AND COLLEGE TRANSFER STUDENTS  
COMPLETE THIS SECTION**

1. What high school did you attend? \_\_\_\_\_
2. What college are you currently attending?  
\_\_\_\_\_ City & State \_\_\_\_\_
3. What year are you currently in? Freshman \_\_\_\_\_ Sophomore \_\_\_\_\_ Junior \_\_\_\_\_
4. What is your first choice of college for which a scholarship is requested?
  - a. College: \_\_\_\_\_ City & State: \_\_\_\_\_
  - b. Acceptance Status: Accepted: \_\_\_\_\_ Pending: \_\_\_\_\_  
Enrolled: \_\_\_\_\_ Transfer: \_\_\_\_\_
  - c. Housing Status: Commuter: \_\_\_\_\_ Resident: \_\_\_\_\_
5. What is your current major? \_\_\_\_\_
6. Did you apply for financial aid from the college you are planning to attend? Yes: \_\_\_\_\_ No: \_\_\_\_\_

**If "No", Please state why not:** \_\_\_\_\_

7. Work Experience:

<i>TYPE OF WORK</i>	<i>EMPLOYER</i>	<i>DATES OF EMPLOYMENT</i>

**8. YOU MUST INCLUDE A COPY OF YOUR FINANCIAL AID AWARD LETTER FROM LAST YEAR (SEPTEMBER 2008 – MAY 2009). IF YOU DID NOT QUALIFY TO RECEIVE FINANCIAL AID LAST YEAR, YOU MUST ENCLOSE DOCUMENTATION OF THE DENIAL. IF EITHER OF THESE DOCUMENTS IS NOT RECEIVED, THE APPLICANT WILL BE DISQUALIFIED.**

**NOTE:** College Transfer applicants will also be required to complete an Application Supplement showing their final college selection. The Application Supplement will be mailed by RSF in April 2009 and must be returned to RSF by the date found in the Application Supplement.

**READING SCHOLARSHIP FOUNDATION INC.  
STUDENT APPLICATION**

**NOTE:** Use the reverse side of this sheet should you require additional space.

**PART IV: ALL APPLICANTS COMPLETE THIS SECTION**

1. (Check one.) Are you a male \_\_\_\_\_ or female \_\_\_\_\_?
2. Some donors have expressed a preference to have their scholarships awarded to applicants with special backgrounds or educational goals. In order to comply with these stipulations, please check all that apply:

QUESTION	√
Are you a child or grandchild of a veteran of the U.S. Armed Forces?	
Is either parent a teacher in the Reading School System?	
Is either parent a teacher aide in the Reading School System?	
Are you a parishioner at St. Agnes Church?	
Are you a parishioner at St. Athanasius Church?	
Have you played in the Reading Senior Baseball League?	
Have you played RMHS baseball?	
Have you participated in RMHS football?	
Have you played varsity soccer at RMHS?	
Have you played Lacrosse at RMHS?	
Have you participated in Reading Youth Baseball?	
Have you participated in Reading Youth Hockey?	
Have you participated in Reading Youth Softball?	
Did you attend Sandra Lane Nursery School?	
Do you, your parents, or grandparents currently work at Atlantic Food Mart?	

3. What is the total number of family members who will be attending college full-time in 2009-2010, including yourself?  
\_\_\_\_\_

4. Please check if you are planning a course of study in any of the following fields.

<input type="checkbox"/>	Art/Graphics Arts	<input type="checkbox"/>	Firefighting	<input type="checkbox"/>	Medicine
<input type="checkbox"/>	Business	<input type="checkbox"/>	Health Related	<input type="checkbox"/>	Music (minor or major)
<input type="checkbox"/>	Computer Science	<input type="checkbox"/>	History	<input type="checkbox"/>	Nursing
<input type="checkbox"/>	Conservation/Ecology	<input type="checkbox"/>	Horticulture	<input type="checkbox"/>	Photography
<input type="checkbox"/>	Education	<input type="checkbox"/>	Latin or French	<input type="checkbox"/>	Physical Therapy
<input type="checkbox"/>	Engineering	<input type="checkbox"/>	Law Enforcement	<input type="checkbox"/>	Practical Arts
<input type="checkbox"/>	Environmental Concerns	<input type="checkbox"/>	Mathematics	<input type="checkbox"/>	Theater Arts

5. List your membership and participation in school and community organizations/activities:  
\_\_\_\_\_  
\_\_\_\_\_

6. Explain any special family or business circumstances that the awards committee should consider:  
\_\_\_\_\_  
\_\_\_\_\_



**FINANCIAL ASSISTANCE QUESTIONNAIRE (FAQ)© for 2009-2010 school year**

**Chapter Name: Reading MA 0305**

\*See reverse side for instructions to assist in completing this form

**A. STUDENT**

- Mr.
- Ms.

\_\_\_\_\_

Last Name	First Name	Middle Initial	Social Security Number
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Permanent Mailing Address: \_\_\_\_\_

#	Street	Apartment #
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\_\_\_\_\_ ( ) \_\_\_\_\_

City	State	Zip	Daytime Phone Number
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**B. PARENTS' INCOME, EXPENSE, AND ASSET DATA (FOR THE YEAR JANUARY 1, 2008 TO DECEMBER 31, 2008)**

The applicant's parent(s) must complete the following section. **NOTE:** If legally classified as an independent student, use this section to supply your (and your spouse's, if any) financial information. Indicate whether the information is from:

- Estimates based on current income information to be filed by April 15, 2009.
- A completed tax return - IRS FORM 1040 filing date of April 15, 2009.

State of Residence (state where parents or independent student reside and pay state income tax) \_\_\_\_\_

- 1. Adjusted gross income (FORM 1040) ..... \$ \_\_\_\_\_
- 2. Total federal tax paid (FORM 1040)..... \$ \_\_\_\_\_
- 3. Total income of father or self if independent student ..... \$ \_\_\_\_\_
- Total income of mother ..... \$ \_\_\_\_\_
- 4. Yearly untaxed income and benefits: Social Security, AFDC, child support, other..... \$ \_\_\_\_\_
- 5. Medical/Dental expenses not paid by insurance (exclude premiums)..... \$ \_\_\_\_\_
- 6. Total cash, checking, savings, cash value of stocks, etc. (exclude retirement plan funds, IRA, 401(k))..... \$ \_\_\_\_\_
- 7. Total number of family members living in the household and primarily supported by the reported income..... # \_\_\_\_\_

**C. ADDITIONAL INFORMATION**

Parents' or independent student's current marital status is:  single  married  separated  divorced  widowed

Total number of family members who will be attending a post-secondary school at least 1/2 time during the 2009-2010 school year, including applicant ..... # \_\_\_\_\_

**D. CERTIFICATION AND SIGNATURES**

**CERTIFICATION:** All of the information on this form is true and complete to the best of my (our) knowledge. If asked by an authorized official of Scholarship America, (we) agree to give proof of the information that I (we) have given on this form. I (we) realize that this proof may include a copy of my (our) 2008 U.S. and/or state income tax return. I (we) also realize that if I (we) do not give proof when asked; the student may not receive aid.

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Parent's Signature*  Father  Mother  
*(Not required for independent student)*

Do you have legal custody of the student?  Yes  No

Is the student your dependent?  Yes  No \_\_\_\_\_

Date Completed

\*\*\*\*\*MAIL THIS COMPLETED FORM ALONG WITH A \$5.00 PROCESSING FEE TO:\*\*\*\*\*  
**SCHOLARSHIP AMERICA, PO BOX 297, ST. PETER, MN 56082**

## INSTRUCTIONS FOR COMPLETING THE FINANCIAL ASSISTANCE QUESTIONNAIRE (FAQ)

- A. APPLICANT INFORMATION: The scholarship applicant's name should appear on the first line on the FAQ; however, the questionnaire must be completed by the parents of the applicant. An exception is if the applicant is legally classified as an independent student. The independent student must supply his/her financial information.
- B. PARENTS' INCOME, EXPENSE AND ASSET DATA: Information on this form must be from the parents' completed tax return or based on estimated information to be filed by April 15, 2009. Be sure to check the appropriate box.
1. **Adjusted Gross Income** can be found on IRS FORM 1040 and is gross income reduced by specific adjustments allowed by law.
  2. **Total Federal Tax Paid** includes the total amount of federal income tax to be paid as reported on IRS FORM 1040. This is not the amount withheld from employee paychecks. (The amount withheld should be adjusted by any refund or additional taxes due.) Do not report state income tax.
  3. **Total Income** earned should be reported individually for both parents. If the student resides with only one parent, Scholarship America prefers to receive financial information from both natural parents, when possible. Financial information must be received from the parent who claims the child as a dependent for tax purposes. If a parent has remarried, the spouse's information is required if the spouse is a legal guardian of the student, or claims the student as a dependent, or the student is included in the spouse's benefit plan. If necessary, two Financial Data sections may be submitted by the student. A copy of the Financial Data section may be made in order for one to be completed by each parent.
  4. **Untaxed Income and Benefits** include any other income or benefits not included in the adjusted gross income figure. Do not include untaxed contributions to retirement plans.
  5. **Medical and Dental Expenses** include only those expenses not paid by insurance. Do not include premium payments.
  6. **Total cash, checking, savings, cash value of stocks, etc.** include liquid assets that can be used for educational expenses. Not included are IRA, 401K, or other retirement plan funds.
  7. **Total number of family members** living in the household and primarily supported by the above income includes dependent college students living away from home.
- C. ADDITIONAL INFORMATION: Be sure to check the appropriate box giving the current marital status of the persons for whom financial information is being submitted.
- Include the total number of **all** family members attending post-secondary school at least half time. (Post-secondary school includes any two- or four-year college or vocational school.) **Be sure to include the applicant in this number.**
- D. CERTIFICATION AND SIGNATURES: This form must be signed by both the student and the parent completing the FAQ. Parents' signature is not required for an independent student. Please read the certification.

**NOTE:** Any exceptions to providing financial information as instructed above must be submitted to Scholarship America in writing.