



## Lemieux-Lovejoy Youth Scholarship

### Information for Scholarship Applicants

The **BPW/Maine Futurama Foundation** awards a scholarship in the amount of \$1200 to a high school senior girl or recent graduate who will enroll in an accredited college or training program in the fall of more than one year in length.

Rachel E. Lemieux was a member of the Augusta BPW and helped to establish and serve on the original Futurama Craft Fair Committee which started the funding of Futurama scholarships. Arline Andrews Lovejoy was a member of the Winthrop BPW and served the BPW/Maine Federation on both the Futurama and Scholarship Committees.

This scholarship is designed to assist a female student in meeting the educational expenses for the first year of post-secondary study. *The scholarship payment will be made directly to the school to be applied to the **second academic term**. The Maine Community Foundation will send a check in December to school/college; if student is still enrolled, both school/college and student must sign check.*

### Criteria

The applicant must meet the following requirements:

- Be a Maine resident who will graduate or has graduated from high school and who will enroll as a freshman in an accredited college or post-secondary education this year.
- Demonstrates financial need in order to complete educational program.
- Have a realistic goal relating to educational plans.

### Requirements

The following items must be submitted with the application:

- Completed application form, **with statement of financial need completed by a Financial Aid Official or Guidance Counselor.**
- Official transcript from the high school.
- Verification of acceptance from the college or school.
- Two letters of recommendation pertinent to this application. These may be from school officials, teachers, employers, or other persons not related to the applicant.
- A **hand signed** statement by the applicant describing educational, personal and career goals. This should include applicant's financial need and family financial situation. Electronic signature is not accepted.

\*No application will be considered complete until all supporting materials are received.

The deadline for completed applications is **April 13<sup>th</sup>**. *Late applications will not be considered.* Please send all materials to Marilyn Ladd, Office Manager, The Futurama Foundation, 103 County Road, Oakland, ME 04963.

The most current application form can be found on the Futurama Foundation's website at **[www.bpwmefoundation.org](http://www.bpwmefoundation.org)**.



## Lemieux-Lovejoy Youth Scholarship

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Telephone Number: ( ) \_\_\_\_\_

High School Attended: \_\_\_\_\_ Enrolled Dates: \_\_\_\_\_ Grad Date: \_\_\_\_\_  
 College Attending: \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time \_\_\_\_\_  
 Major/Area of Study: \_\_\_\_\_  
 If a program other than college, please describe: \_\_\_\_\_

Current Employer: \_\_\_\_\_ Annual Income: \_\_\_\_\_  
 Amount of Income/Savings used for educational expenses: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
 Parents' names, occupations, and income if under 25 years: \_\_\_\_\_  
 List siblings that are attending college:

Siblings' Names	Institution Enrolled	Age

Note: If you have other information pertinent to this application please provide on separate paper in detail.  
*Examples: medical situation, excessive childcare costs, etc.*

### Statement of Financial Need for the Ensuing Academic Year

**Financial Aid Award for Academic Year**

Total Grant Funds: \$ \_\_\_\_\_  
 Total Scholarship Funds: \$ \_\_\_\_\_  
 Total Direct Funds: \$ \_\_\_\_\_  
 Total Private Loans: \$ \_\_\_\_\_  
 Other Aid: \$ \_\_\_\_\_  
 TOTAL of All Financial Aid: \$ \_\_\_\_\_

**Estimate Expenses**

Tuition/Fees: \$ \_\_\_\_\_  
 Books/Supplies: \$ \_\_\_\_\_  
 Room/Board: \$ \_\_\_\_\_  
 Travel/Miscellaneous: \$ \_\_\_\_\_  
 TOTAL Expenses: \$ \_\_\_\_\_

Effective Family Contribution  
 (Student portion): \_\_\_\_\_

Effective Family Contribution  
 (Parent portion): \_\_\_\_\_

Name of Financial Aid Official providing these figures (print): \_\_\_\_\_

Title: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby apply for the above scholarship and agree to conform to all the regulations governing it. The above statements are certified to be true and correct to the best of my knowledge.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_