

Isaac Emerson Palmer Scholarship Fund 2009

Townsend Palmer established the **Isaac Emerson Palmer Scholarship Fund**, in memory of his father who was an industrialist in Montville during the 1800's.

The requirements for eligibility include:

- ❖ Bona fide resident of the Town of Montville, Connecticut
- ❖ Less than 25 years of age
- ❖ A graduate of Montville High School or school of equal rank
- ❖ Applying as a full-time student in a school of higher learning for practical education

Submission of the applications and supporting documents must be completed in total. Any incomplete or missing data will result in withdrawal of the application from any consideration.

Documents to be included with completed student/parent applications:

- ❖ One letter of recommendation (excluding family members)
- ❖ Official transcript of most recent academic achievement
- ❖ Itemized college budget for 2008-2009 or 2009-2010 from the college financial aid office
- ❖ Copy of parent's/guardian's and applicants 2008 Federal Income Tax (Form 1040, 1040A or 1040EZ)
(If you are an Independent Student, please have the college verify your status)
- ❖ An essay - Explain how this scholarship will assist you in attaining your goal.
Not to exceed one double-spaced typewritten page.

Completed applications and supporting documents are due no later than:

Friday, March 27, 2009

They are to be mailed or delivered to:

Dr. Theodore H. Phillips
Director of School Counseling
Montville High School
Old Colchester Road, Oakdale, CT 06370
Phone: 860-848-1285 / Fax: 848-8067

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Student Application

PLEASE PRINT:

	Father/Male Guardian	Mother/Female Guardian
1. Name:	<hr/>	<hr/>
2. Occupation:	<hr/>	<hr/>
3. Employer:	<hr/>	<hr/>
4. Work Telephone #:	<hr/>	<hr/>
5. Age:	<hr/>	<hr/>
6. Salary (annual):	<hr/>	<hr/>
7. Interest Income (total):	<hr/>	<hr/>
8. Dividends:	<hr/>	<hr/>
9. Other Income (Taxable & Nontaxable):	<hr/>	<hr/>
10. Social Security / Veteran's Benefits:	<hr/>	<hr/>

11. Housing Information:	Own:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Rent	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Year Purchased:
If owned, purchase price:							\$ <hr/>
Amount Owed on mortgage:							\$ <hr/>
Other real estate - present value:							\$ <hr/>
Checking Accounts:							\$ <hr/>
12. Asset Information:	Savings Account/Certificates:						\$ <hr/>
	Current Value of Stocks/bonds:						\$ <hr/>
13. Indicate medical/dental expenses not covered by insurance:							\$ <hr/>
14. Amount parents expect to contribute toward education:							\$ <hr/>

15. Name of dependents (Do not include applicant or parents)	Age	Relationship	Year in college (If Applicable)
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

16. Attach to this application any statement concerning any unusual family circumstance.

We affirm the accuracy and correctness of this application.

Date	Male Parent/Guardian	Female Parent/Guardian
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