



The
**HORACE SMITH
FUND**

Walter S. Barr Scholarship

INSTRUCTIONS FOR APPLICANTS

This application contains the following pages:

- Application – 4 pages
- Parent’s Financial Statement – 3 pages
- Reference Forms – 3 pages

1. Completed applications must be received in the Horace Smith Fund office not later than January 10. Applications received after that date cannot be considered.
2. The applicant is responsible for having a high school transcript mailed to the above address.
3. Applicants are expected to take the Scholastic Aptitude Test (SAT) of the College Entrance Examination Board if they have not already done so. When registering for the examination or when completing a College Board transcript request form, please ask the College Board to send the scores to the us. This is done by indicating 0017 as the code number and “Barr Scholarship Committee,” 1441 Main Street, Springfield, MA, 01103 as one of the institutions to which a score request should be sent. SAT scores should be noted on the high school transcript. To enhance your application you may also send us a copy of your most recent MCAS test report; and, if you have taken it, the ACT assessment, student report.
4. The three reference forms enclosed are to be completed by references of the applicant’s choice. The applicant should complete the first four lines of each form. At least one reference should be from a high school teacher familiar with the applicant’s ability and promise. Completed reference forms should be mailed to the Barr Scholarship Committee at the above address.
5. The confidential financial statement must be completed by the applicant’s parents, and returned with the application or the applicant may submit a copy of the Free Application for Federal Student Aid (FAFSA).
6. Awards will be made on the basis of all available information, including school records and recommendations, with consideration given to the financial need of the candidate.

WALTER S. BARR SCHOLARSHIP APPLICATION

The primary purpose of the Barr Scholarships is to financially assist **Hampden County** High School Seniors who plan to continue their education.
(Completed applications must be received in the Horace Smith Fund office no later than **January 10**)

Date: _____

I PERSONAL AND FAMILY DATA:

1. Name: _____
(First Name) (Middle Name or Initial) (Last Name)

2. Address: _____
(Street and Number) (City or Town) (State) (Zip Code)

3. Date of Birth: _____ Telephone: _____

4. HighSchool: _____ E-Mail Address: _____
Year of Expected Graduation: _____

5. Parent: _____
(Name of Father, Mother or Guardian)

Parent's Employer and Occupation: _____

6. Names of brothers and sisters, their ages, and current educational or occupational status: _____

7. Which of the above are dependents of the parents? _____

8. References. Give the names and addresses of three persons, not relatives, including one teacher whom we may consult.

(1) (Teacher) _____

(2) _____

(3) _____

II APTITUDES AND INTEREST:

1. Name the two school subjects you have liked best.

(1) _____

(2) _____

Please give reasons for your preferences. (You may include a separate sheet of paper, if necessary.)

2. Offices held in school or student organizations:

3. List your activities in school (athletics, dramatics, debating, music, journalism, etc. ...):

4. Activities outside of school (scouts, church organizations, clubs, etc.):

5. Awards or prizes for school achievement:

6. Special training (music, art, etc.):

III FINANCES

1. Work experience, including summer. (if none, explain why)

Kind of Work	Dates of Employment	Amount Earned
_____	_____	_____
_____	_____	_____
_____	_____	_____

IV COLLEGE ENTRANCE

1. Have you applied for admission to any college? _____
If so, state which, with date of application and order of preference.

2. Have you been accepted to any college? _____
If so, which? _____

3. First year cost at _____
(Name of College. Use College's official estimate)

Your estimated expenses:		Your estimated resources for first year:	
Tuition	\$ _____	Total of your savings	
Fees	\$ _____	from all sources	\$ _____
Room/Board	\$ _____	Amount of these savings to be	
Others (identify)		used for first year costs	\$ _____
		Given by parents or guardian	\$ _____
		Amount you expect to earn	
		next summer toward your	
		college costs	\$ _____
	\$ _____	Aid offered by your college	\$ _____
	\$ _____	a. Grant	\$ _____
	\$ _____	b. Work/Study Opportunity	\$ _____
	\$ _____	c. Loans	\$ _____
		Other (explain)	\$ _____
Total Expenses	\$ _____	Total Resources	\$ _____

V INTENTIONS AFTER COLLEGE

1. What are your plans after graduation? Please be as specific as possible.

VI PERSONAL STATEMENT

Tell the Committee about yourself, your interests, purposes and activities. Comment more fully, if you wish, on some of the statements in the application. Include any other matters which may have a bearing on this award. Why do you consider yourself to be a good applicant for a Walter S. Barr Scholarship? Sign your statement on this page. If you need more space, attach another sheet. Send the completed form to:

The Barr Scholarship Committee
The Horace Smith Fund
1441 Main Street
Springfield, MA 01103

Signature of Applicant

CONFIDENTIAL

The Horace Smith Fund
1441 Main Street
Springfield, MA 01103

To the parents of _____,
who has applied for aid from the Walter S. Barr Donation for college students. You are asked to answer the following questions and to return this form as soon as possible to the Executive Secretary of the Horace Smith Fund. The information furnished on this form will be kept strictly confidential.

Names of parents (guardian) _____

(Street Address) (City) (State) (Zip)

Other family members who are dependent financially or who contribute to the support of the family:

Name	Age	Now in School (indicate where) or employed by	Dependent (check which one)	Contributes (check which one)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PARENTS' FINANCIAL STATEMENT

Father's Employer: _____ Mother's Employer: _____

Employer's Address: _____ Employer's Address: _____

No. years with Employer _____	Title/Position _____	No. years with Employer _____	Title/Position _____
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Annual salary or gross income from business or profession: \$ _____	Annual salary or gross income from business or profession: \$ _____
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Gross Income from Other Sources: \$ _____	Gross Income from Other Sources: \$ _____
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Amount Provided by Other Members of the Family: \$ _____

Total Family Income: \$ _____

ASSETS	Amount	LIABILITIES	Unpaid Balance
Cash (include bank deposits, money market accounts, certificates of deposit)	\$ _____	Loans payable Unsecured (credit card debt, etc.)	\$ _____
Marketable securities (stocks, bonds, mutual funds, etc.)	\$ _____	Secured (autos, RVs, boat, etc.)	\$ _____
Market value of real estate	\$ _____	Real estate mortgage debt	\$ _____
Other assets (include autos)	\$ _____	Other liabilities	\$ _____
Tax-deferred retirement funds (IRA, 401k, etc.)	\$ _____		
Total Assets	\$ _____	Total Liabilities	\$ _____
		Annual Rent (if any)	\$ _____

1. List and explain any recent or expected unusual expenses or income:

2. Comment if desired: (Use the other side of this page if necessary).

3. We plan to contribute the following amount next year to applicant's education: _____

BANK REFERENCE:

Institution

Address

_____	_____
_____	_____
_____	_____

SIGNATURES:

Date: _____

Walter S. Barr College Scholarship
For Graduates of Hampden County High Schools
who are about to enter college.

Name of Student _____
Address _____
Name of Secondary School _____

The person named above has applied for a Walter S. Barr Scholarship and has given your name as a reference. Please answer the questions below and rate the applicant in comparison with other students whom you know.

- How long and how recently have you known the applicant and in what connection? _____

- What opportunity have you had for judging the applicant's merit? _____

- What can you say regarding the applicant's need for assistance? _____

- Please check the appropriate ratings below. If you lack a basis for fair judgement, please do not hesitate to say so

QUALITIES	One of the top few encountered in my career	Superior	Good	Average	Below Average	Do Not Know
Scholastic ability						
Intellectual curiosity						
Industry						
Character						
Dependability						
Emotional Stability						
Social Adaptability						
Writing Skills						

IMPORTANT. Please state on the other side any further information, whether favorable or unfavorable, which you think the Scholarship Committee should have before making its decision. Why do you consider the applicant a good candidate for this award?

This form should be returned promptly to The Horace Smith Fund, 1441 Main Street, Springfield, MA 01103.

Name (please print) _____

Signature _____

Date _____

Address _____