

Application

Fields with an asterisk (*) are required.

The Goddard Foundation Scholarship is awarded to students who are planning to continue their education in the health care field. It is available to students who are enrolled in public schools, who are residents of Brockton, Bridgewater, East Bridgewater, Easton, Raynham (who attend Bridgewater/Raynham H.S.)., Stoughton, or West Bridgewater. If possible, two \$3,000 scholarships will be awarded to each town's public high school, with Brockton being eligible for eight \$3,000 scholarships. Each student must have been accepted into a full time, 4 year **OR** 2 year degree program. They must be a person of good character, demonstrate a financial need, and have a well-balanced interest in studies and extracurricular activities.

Awards are at the discretion of the Scholarship Committee; additional scholarships may be awarded. There will be four \$3,000 scholarships available for continuing education college students, who must reside in one of the six towns listed above. Multi-year awards are not guaranteed.

APPLICATIONS CANNOT BE CONSIDERED UNLESS ACCOMPANIED BY AN *OFFICIAL* ACADEMIC TRANSCRIPT (NO COPIES), ESSAY AND TEACHER RECOMMENDATION. OFFICIAL TRANSCRIPTS SHOULD BE MAILED FROM YOUR SCHOOL TO:

The Goddard Health Foundation C/O Attorney Maria Unda 130 Liberty Street, Suite 12 Brockton, MA 02301

School address:*

PLEASE ANSWER QUESTIONS AND SUBMIT THIS APPLICATION AND ALL ASSOCIATED DOCUMENTS <u>BY</u> APRIL 1, 2024. NO APPLICATIONS RECEIVED AFTER THE DEADLINE WILL BE ACCEPTED.

SCHOLARSHIP WINNERS WILL BE NOTIFIED BY MAIL.

PLEASE NOTE: FOR COLLEGE FRESHMEN THIS IS A "SECOND SEMESTER SCHOLARSHIP" AND WILL BE PAYABLE DURING THESECOND SEMESTER OF THE FIRST YEAR OF COLLEGE. IT WILL BE THE RESPONSIBILITY OF EACHRECIPIENT TO SUBMIT A COPY OF YOUR FIRST SEMESTER OFFICIAL TRANSCRIPT AND SECONDSEMESTER TUITION BILL TO ATTORNEY UNDA (ABOVE) AT THE END OF THE FIRST COLLEGE SEMESTER. AWARD WINNERS SHOULD MARK THEIR CALENDARS ACCORDINGLY. NO CHECK WILL BE ISSUEDWITHOUT THE REQUIRED DOCUMENTATION.

ALL DOCUMENTATION MUST BE RECEIVED NO LATER THAN APRIL 1st OF THE FOLLOWING YEAR OR THE SCHOLARSHIP IS VOID / WAIVED.

Name:*	
Date of Birth:*	Gender:*
	_ □ Male □ Female
Please list the school you are presently attending:*	



Please list your current (this year) extracurricular activities:*
Please list your current {this year) volunteer activities:*
ricase not your current (und year) volunteer activities.
College Admissions:
Please list colleges or institutions to which you have been accepted . If you have accepted admission to a
college/institution, please state which one.
Identify the course of study you will pursue:*
Essay (250 words or less)THIS ESSAY QUESTION MUST BE COMPLETED*:

Essay Question

The mission of the Goddard Foundation is to educate, fund and support the general health of the community. How can you relate to that mission and how do you intend to advance it over the course of your career?

Note: High school seniors must also send a copy of their college application essay.





This section pertains to your employment:

Applicant's Employer:*
Applicant Current Position:*
Applicant Monthly / Weekly Earnings:*
This section to be filled out parent(s) or guardian(s):
Father/ Guardian:*
Father/ Guardian Address:*
Father/ Guardian Employer Name:*
Father/ Guardian Current Position:*
Father/ Guardian Annual Gross Income:*
Mother/ Guardian:*

Mother/ Guardian Address:*



Mother/ Guardian Employer:* Mother/ Guardian Current Position:* Mother/ Guardian Annual Gross Income:*
Mother/ Guardian Current Position:*
Mother/ Guardian Current Position:*
Mother/ Guardian Annual Gross Income:*
Do you own your own home? If so, what is the monthly payment?:*
What Is the unpaid mortgage amount?:*
Do you rent? If yes, what is the monthly payment?:*
Please list other investments (Savings, IRA Accounts, Real Estate, etc.):*
Please list any unusual additional expenses(extraordinary or hardship expenses, etc.):*
Please list applicant's dependent siblings and ages:*

Please verify that your application is complete by using the following checklist.



Application Checklist

APPLICANT NAME:
☐ Fully completed Goddard Foundation Application.
☐ Official academic transcript. NOTE: MUST come from your high school guidance office or college registrar's office and have an official school seal. Copies will not be accepted.
☐ Essay topic (maximum of 250 words): "The mission of the Goddard Foundation is to educate, fund and support the general health of the community. How can you relate to that mission, and how do you intend to advance it over the course of your career?"
☐ High school seniors must also include a copy of their college essay.
☐ A teacher recommendation is required (a college recommendation and or reference letter is acceptable).
Deadline is April 1, 2024.
You may also apply online here: https://www.grantinterface.com/Home/Logon?urlkey=goddardfoundationscholarships