

**NEW APPLICATION**  
**Application for the**  
**Julia and Philip Sheridan Fund Scholarship**

*"a scholarship fund for deserving and needy graduates of Greenville High School who just fail to receive scholarships from other sources; such scholarships to be applied for the purpose of education at a Trade School or in Nursing" established by the Last Will and Testament of Julia E. Crafts Sheridan and administered by the Town of Greenville*

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Years attended Greenville High School: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Have you previously attended college Yes / No If yes, explain on reverse side

Vocation you intend to pursue: \_\_\_\_\_

School you plan to attend: \_\_\_\_\_

Date you plan on beginning your studies: \_\_\_\_\_

Academic major: \_\_\_\_\_

Address of school: \_\_\_\_\_

Length of course to receive diploma/degree: \_\_\_\_\_ Annual tuition fee of School: \_\_\_\_\_

Estimated annual living expenses while attending school: \_\_\_\_\_

How do you plan to finance your education? \_\_\_\_\_

Have you received any other scholarships? Yes / No

If yes, please indicate name of scholarship and financial value:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Do you plan to work during vacations to help pay your expenses? Yes / No

Please check \_\_\_\_\_ to indicate that you have used the reverse side of this application to include additional information that you feel will contribute to the consideration of this application.

Do you understand that this scholarship is available only to those students who have graduated from Greenville High School and plan to pursue a career in the field of nursing or plan pursue a trade by attending trade (technical / vocational / community college) school? Yes / No

To maintain your eligibility to receive your scholarship, you must remain in the major indicated above, be a full-time student (12 or more credit hours) and earn at least a 2.0 (C average) each semester. This scholarship may be renewable, please submit a new application to the Greenville Board of Selectmen by May 1<sup>st</sup>.

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

Previous college attended: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates attended: \_\_\_\_\_ Major: \_\_\_\_\_  
Degree earned: \_\_\_\_\_  
Other information:

Return completed application form directly to the Greenville Town  
Office no later than May 1st.