



THE ARCADIUS, EMMA & ROBERT LEMIEUX SCHOLARSHIP APPLICATION FORM

High School _____

Administered by the

MetroWest Chamber Educational Foundation, Inc.

1671 Worcester Road, Suite 301
Framingham, MA 01701

The Arcadius, Emma & Robert Lemieux Scholarship was established to assist seniors in public or private high schools in the MetroWest area who wish to continue their education beyond high school, whether in college, vocational or technical schools, but are unable to do so due to financial difficulties not of their own cause. Awards will be up to \$1,000 per student.

To be eligible to submit a scholarship application you must:

- a. Reside in the MetroWest/495 area of Massachusetts (Ashland, Bellingham, Dover, Franklin, Framingham, Holliston, Hopedale, Hopkinton, Hudson, Marlborough, Medfield, Medway, Milford, Millis, Natick, Northborough, Sherborn, Southborough, Sudbury, Wayland, Wellesley, Westborough or Weston);
- b. Be a member of the senior class of a public or private high school with a grade average of C or better;
- c. Demonstrate financial need (documentation such as a FAFSA will be required);

Candidates who are related to any officer or director of the Trustee, or who are related to any member of the scholarship committee will not be eligible.

Applications may be obtained from your school Guidance Office. Applications must be postmarked no later than April 5, 2019.



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Application and Submission Process

Checklist of required documentation:

- A completed application form. Please type or print.
- A brief personal letter stating why you are applying for this scholarship.
- Any special qualifications that you may have.
- The Student Aid Report from a current, completed FAFSA form including W-2 forms for parent(s) or legal guardian(s).
- A complete transcript of your secondary school record including non-academic activities.
- A letter of recommendation from your High School Guidance Counselor or Principal.

Give all of your documentation to your Guidance Counselor and ask him or her to add your transcript and a letter of recommendation and mail by April 5, 2019 to: MetroWest Chamber Educational Foundation, Inc., 1671 Worcester Road, Suite 301, Framingham, MA 01701.

Full Name _____
(Last) (First) (Middle)

Home Address _____
(Street) (Town) (Zip Code)

Contact Info _____
(Telephone) (email)

Name and address of college/university, vocational or technical school you plan to attend, with complete mailing address:

Estimate of yearly cost of tuition, board, room, etc.: _____

Latest secondary school attended (with dates):

Estimate the following funds you will have available for your first year:

(a) From parents/(guardian) _____

(c) From own savings/summer earnings _____

Total _____

The Student Aid Report from FAFSA must accompany this application.

The above information is correct to the best of my knowledge.

Date

Signature(s) of Parent or Legal Guardian

If any of the above information should change materially prior to the announcement of the scholarship winners, it is your responsibility to notify us immediately, including if you should decide to go to a different school.