



Town Of Durham Scholarship Application

630 Hallowell Road
Durham, Maine 04222

Incorporated 1789

Application Number: _____
(For Office Use Only)

www.durhammaine.gov

Tel: 207-353-2561

Fax: 207-353-5367

APPLICANT INFORMATION: Section 1. Personal Information

First Name: _____ Last Name: _____

Home Address: _____

Mailing Address: _____

Date of Birth: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

Parental/Guardian Information (if applicable):

Parent(s) Name: _____

Parent(s) Email: _____

Parent(s) Cell Phone: _____

CERTIFICATION AND RELEASE AUTHORIZATION

I certify that this information is complete and accurate. I authorize the release of this information to confirm and verify this application. I understand that if I am awarded the scholarship, it will be released after successful completion of my first semester. I further grant unto the Town of Durham, Maine the right to use my name and/or photograph in connection with this Scholarship Program.

Signature of Applicant

Date

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Section 2. Academic Information

Name of High School: _____

High School Graduation: Month: _____ Year: _____

High School Rank: _____ out of _____ GPA: _____

SAT/ACT Scores: _____

Post-Secondary School: _____

Anticipated Major(s): _____

Section 3. Activities and Interests:

A. List and briefly describe your high school extracurricular activities (e.g. memberships in organizations, sports, etc.):

Organization Involved	Position Held	Date of Involvement

Brief description of your responsibilities:

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B. List and briefly describe volunteer activities in which you have been involved:

Organization	Activity	Date of Involvement

Brief description of how you participated:

C. List honors or academic awards you have received (e.g. scholarly activities, research, etc.):

Award/Honor	Institution/Organization	Date

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D. List and briefly describe any work experience:

Position	Employer	Dates of Employment

Brief description of your work responsibilities:

Section 4 – Short Essays:

A. What is the purpose of post-secondary education and how will it benefit you?

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B. Why should you be chosen to receive the Durham Community Scholarship?

C. How will you be financing your college education and how will a scholarship impact your plans?

D. Is there any other information that we should know about you? This is your opportunity to include information that is not contained in other areas of the application. Please be specific.

Submitting your application:

Please submit the following to be considered for the Durham Community Scholarship:

1. Completed application form
2. Up to two (2) letters of recommendation from your teachers, counselor or community leaders
3. Copy of the applicant's high school transcript
4. Copy of SAT/ACT scores
5. Letter of acceptance to accredited academic, vocational, professional or technical school, college or university (if available)

This application is due on March 6, 2025 before 5:00 p.m.

Return application to:

**Town of Durham Scholarship Application
630 Hallowell Road
Durham, ME 04222**

Please direct any questions to:

**Kendra O'Connell
peaksi1@comcast.net**

Your request for a scholarship becomes valid ONLY when the application and all supporting documents are submitted.