



Sippican Woman's Club  
152 Front Street  
P.O. Box 121  
Marion, MA 02738  
SWC.Marion@gmail.com

## Sippican Woman's Club Scholarship Application (Continuing Education Students Only • Marion Residents Only)

Application deadline: April 15

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

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

Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

1. College or school you plan to attend: \_\_\_\_\_

1a. Projected cost: \_\_\_\_\_

1b. Proposed major: \_\_\_\_\_

2. List summer and part-time jobs: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. List brothers and sisters and their ages: \_\_\_\_\_

\_\_\_\_\_

3a. Number of siblings in college this year: \_\_\_\_\_

4. Class(es) Year of Graduation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Please provide your budget estimate for your first year of college education:

Parent & Student Savings: \$ \_\_\_\_\_

Workstudy/Grants: \$ \_\_\_\_\_

Scholarship(s): \$ \_\_\_\_\_

Anticipated Loans: \$ \_\_\_\_\_

Total: (should equal 1a) \$ \_\_\_\_\_

Please attach the following:

5. Letter explaining your educational plans and goals.

*This is your opportunity to help us see you as the unique individual that you are.*

Please include:

5a. Your passions, hobbies, interests, extracurricular activities and community service;

5b. Specifics of your financial need in the above letter;

5c. Official College Transcripts

### Instructions

#### Print and send to:

Sippican Woman's Club  
Attn: Scholarship Committee  
P.O. Box 121  
Marion, MA 02738

**Or fill out this PDF  
and send back via email to:  
[eileenmerlino42@gmail.com](mailto:eileenmerlino42@gmail.com)**

*Application deadline: April 15*

*Please make sure all requested  
information has been provided.  
Incomplete applications will not  
be considered.*