



Alan B. Carr Memorial Scholarship Application

The Cowanesque Valley Class of 1984, together with the family and friends of Alan B. Carr, established this memorial scholarship fund to remember Alan, a son, brother, nephew, cousin, classmate and friend. Alan tragically lost his life in March of 1984 a few months before graduating from high school. Alan was an Eagle Scout and an athlete; he held a love for cars, racing, hunting and the great outdoors. His plans had been to continue his education seeking a degree in electronics technology. More than 30 years later, Alan is remembered and his legacy continues forever through this scholarship.

Eligibility Criteria:

- Graduating senior from Cowanesque Valley Junior/Senior High School.
- Accepted into an accredited college, university, or technical school with a preference given to students pursuing a career in a technical or vocational field of study.
- Please attach a short, computer-generated essay (200–250 words double spaced) about your short and long term goals. What steps have you taken thus far in achieving the goals and include your biggest accomplishment and why you think it is. How do you spend your free time? Please address your interests and hobbies.
- Attach a copy of your transcript.
- Student must have demonstrated financial need.
- Please provide a list of school based activities (including leadership positions, clubs and athletics) as well as community volunteer activities and the number of months or years.

Please see your guidance office for the deadlines.



Alan B. Carr Scholarship Application

Type or print neatly in black or blue ink. Only complete applications will be considered.

Personal Information:

Last Name		First Name		MI
Street Address				Apt. /Unit Number
City	State	Zip Code	Home Phone	Cell Phone
Sex: M F	Date of Birth: ____/____/____ MM/DD/YYYY		Name of High School	Date of Graduation
E-mail Address				

Parental Information:

Father's Last Name		First Name		MI
(If different) Street Address	Apt. /Unit Number		Email Address	
City	State	Zip Code	Best Available Phone Number	
Name of Employer			Employed Since	
Mother's Last Name		First Name		MI
(If different) Street Address	Apt. /Unit Number		Email Address	
City	State	Zip Code	Best Available Phone Number	
Name of Employer			Employed Since	

Employment Information:

Do you currently have a part-time job? Y N	If yes: _____ Position
Name of Employer	Employer's Phone Number



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School Based Information:

Major Field of study in college: _____

Name of college, university or technical school you are attending or will attend:

G.P.A. _____ SAT Score _____ or ACT Score _____.

Class Rank _____ of _____ # students.

Financial Information:

Please enter your Student Aid Index (SAI) number, which is generated after completing your Free Application for Federal Student Aid Form (FAFSA): _____.

If this number is not available at the time of submitting the application, please provide details as to the status of FAFSA. Please notify your guidance office when the number becomes available.

Number of Dependents in Family: _____ Number of other siblings in College: _____

I attest that all personal data included within this application is truthful and in no way misleading. All contents have been completed entirely by me (the applicant) to the best of my knowledge.

If I am selected as a recipient of a Community Foundation for the Twin Tiers scholarship, I agree to permit the Foundation to confer with my school to verify my continuing enrollment during the term of my scholarship.

I also agree that my name and photograph can be used in announcements made by the Community Foundation for the Twin Tiers regarding the scholarship (s) for which I have been awarded.

I also agree that by signing this I permit my school to give the Community Foundation for the Twin Tiers information regarding my SAT scores, current GPA and class rank.

Awards may be used at any accredited college, university, or technical school within the United States.

Signature of Applicant

Date of Signature