

## SCHOLARSHIP CRITERIA

To those students applying for vocational, undergraduate or graduate education, **The John Joseph Moakley Charitable Foundation** will award scholarships of up to \$5,000 each on a competitive basis each spring to successful applicants who demonstrate the following:

- A desire to contribute to one's community through public or charitable service as a vocation or in extracurricular activities.
- Acceptance to a post high-school vocational education program or to an institution of higher education for undergraduate or graduate study.
- Financial need.
- Residency in Massachusetts, with special consideration given to residents of the Ninth Congressional District as it was configured as of 2001. (Boston, Braintree, Brockton, Canton, Dedham, Easton, Medfield, Milton, Needham, Norwood, Randolph, Stoughton, Taunton, Walpole, Westwood).

In selecting scholarship recipients, the foundation may also consider the academic achievement of applicants; however, this is not the only determining factor and should not dissuade applicants of average academic standing from seeking a John Joseph Moakley Charitable Foundation Scholarship.

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Please fill out the following application and return it, along with a written essay (no longer than one page) describing how you think you can make a difference in our world through service, and how participating in community service will help you grow as an individual). Also include proof of acceptance in a vocational or higher educational program and proof of financial need. Application deadline is April 2, 2012.

A request may be made by the Foundation for verification of information by applicants (i.e., academic standing, residency)

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Scholarships for undergraduate or graduate higher education or for vocational education will be awarded in amounts of up to \$5,000 for each scholarship. The John Joseph Moakley Charitable Foundation Board of Directors may, in its discretion, increase the amount of any scholarship to an individual scholarship recipient and may award any scholarship, with conditions, to an individual scholarship recipient over the course of a few years. The Foundation does not discriminate on the basis of color, race, national origin, creed, sex, sexual orientation or religion

**APPLICATION DEADLINE - April 2, 2012**

**PERSONAL DATA**

Name:

\_\_\_\_\_

<i>Last/Family</i>	<i>First</i>	<i>Middle (complete)</i>	<i>Jr., etc.</i>	<i>Gender</i>
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Permanent home address: \_\_\_\_\_

*Number and Street*

\_\_\_\_\_

<i>City or Town</i>	<i>State</i>	<i>Zip Code or Postal Code</i>
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If different from the above, please give your mailing address for all correspondence:

Mailing address: \_\_\_\_\_

*Number and Street*

\_\_\_\_\_

<i>City or Town</i>	<i>State</i>	<i>Zip Code or Postal Code</i>
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Phone at mailing address: (    ) \_\_\_\_\_ Permanent home phone: (    ) \_\_\_\_\_

<i>Area Code</i>	<i>Number</i>	<i>Area Code</i>	<i>Number</i>
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Email address: \_\_\_\_\_

Birthdate: \_\_\_/\_\_\_/\_\_\_ Citizenship:  U.S./dual U.S. citizenship. If dual, specify other citizenship: \_\_\_\_\_

U.S. Permanent Resident visa Citizen of \_\_\_\_\_  Other citizenship: \_\_\_\_\_

<i>Country</i>	<i>Visa Type</i>
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If you are not a U.S. citizen and live in the United States, how long have you been in the country? \_\_\_\_\_

Possible area(s) of academic concentration/major or undecided: \_\_\_\_\_

Possible career or professional plans or undecided: \_\_\_\_\_

**The following items are optional. No information you provide will be used in a discriminatory manner.**

If you wish to be identified with a particular ethnic group, please check all that apply:

African American, Black	Mexican American, Chicano
Asian, including from Indian Subcontinent (country _____)	Native Hawaiian, Pacific Islander
Asian American (country of family's origin _____)	Puerto Rican
Native American, Alaskan Native (tribal affiliation _____ enrolled _____)	White or Caucasian
Hispanic, Latino (country _____)	Other (Specify _____)

## EDUCATIONAL DATA

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High School you now attend (or from which you graduated): \_\_\_\_\_ Date of entry: \_\_\_\_\_

Address: \_\_\_\_\_  
*City or Town State Zip Code CEEB/ACT code*

Date of secondary graduation: \_\_\_\_\_ Is your school public? private? parochial? charter?

Guidance Counselor: \_\_\_\_\_  
*Name*

Counselor's Phone: (\_\_\_\_) \_\_\_\_\_ Counselor's Fax: (\_\_\_\_) \_\_\_\_\_  
*Area code Number Area code Number*

List all colleges/universities at which you have taken courses for credit and list names of course taken and grades earned on a separate sheet. Please have an official transcript sent from each institution as soon as possible.

<i>Name of College/University</i>	<i>Location (City, State, Zip)</i>	<i>Dates Attended</i>
_____	_____	_____
_____	_____	_____

If not currently attending school, please check here: Describe in detail, on a separate sheet, your activities since last enrolled.

Name of post-secondary school for which financial aid is requested. (If unknown, please list in order of preference the schools to which applications for admission have been sent):

Post-Secondary School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Post-Secondary School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Post-Secondary School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Post-Secondary School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Have you been accepted? \_\_\_\_\_

Student will live On Campus Off Campus Will Commute

## ACADEMIC HONORS

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Briefly describe any scholastic distinctions or honors you have won beginning with the ninth grade:

### TEST INFORMATION (If applicable)

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SAT I \_\_\_\_\_  
*Verbal/ Math/ Date Verbal/ Math/ Date Verbal/ Math/ Date*

AP Tests (optional) \_\_\_\_\_  
*Subject/ Score Subject/ Score Subject/Score*

SAT II (optional) Writing: \_\_\_\_\_ Math: \_\_\_\_\_ Other: \_\_\_\_\_  
*Score/ Date Score/ Date Score/ Date*

ACT (if applicable) \_\_\_\_\_ *Composite Score/ Date*

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**TEST INFORMATION (if applicable) – cont'd**

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High school seniors and college freshmen should submit an official transcript of high school grades and have the following section completed by a secondary school representative. College sophomores and juniors need only submit a current official college transcript.

Applicant's Cumulative Grade Point Average (GPA): \_\_\_\_\_

Class Size: \_\_\_\_\_ Class Rank: \_\_\_\_\_

If a rank is not available, please approximate the student's position to the nearest tenth from the top and/or provide a grade distribution for the class:

\_\_\_\_\_

Does the school weight the grades or excludes certain courses to determine rank and/or GPA? \_\_\_\_\_  
If yes, please provide us with a key to this information if it is not already available on the transcript.

Of your graduating class, what percent will attend a four-year college? \_\_\_\_\_%

**FAMILY**

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Mother's full name: \_\_\_\_\_

Father's full name: \_\_\_\_\_

Is she living? \_\_\_\_\_

Is he living? \_\_\_\_\_

Home address if different from yours:

Home address if different from yours:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Occupation*

*Occupation*

If not with parents, with whom do you make your permanent home? \_\_\_\_\_

Please check if parents are married separated divorced (date \_\_\_\_\_) Other \_\_\_\_\_

Please give names and ages of your brothers or sisters. If they have attended college, give the names of the institutions attended, degrees, and approximate dates:

\_\_\_\_\_  
\_\_\_\_\_

**FINANCIAL INFORMATION**

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Total amount of funds/financial aid, etc., presently available for your future education: \$ \_\_\_\_\_

Expected cost of first year of college: \$ \_\_\_\_\_ Have you applied for any other financial aid? Yes No

If yes, please list:

\_\_\_\_\_

Have you been notified that you will receive other financial aid Yes No If yes, please list: \_\_\_\_\_

\_\_\_\_\_

Source of Financial Aid: \_\_\_\_\_ Amount \$ \_\_\_\_\_

Source of Financial Aid: \_\_\_\_\_ Amount \$ \_\_\_\_\_

**FINANCIAL INFORMATION – cont'd**

Last year's Adjusted Gross Income from your parents' IRS Form 1040 (if applicable) \$ \_\_\_\_\_ #Exemptions: \_\_\_\_\_

If divorced or separated, please provide income information on parent with whom the applicant resided most during the past twelve months. Semi-finalists may be asked to provide information about non-custodial parent's income.

Special circumstances in family (illness, disability, unemployment, etc.): \_\_\_\_\_

**EXTRACURRICULAR, PERSONAL AND VOLUNTEER ACTIVITIES (including summer)**

Please list your principle extracurricular, community, and family activities and hobbies in the order of their interest to you. Please include the activity, grade level(s) in which you participated, approximate time spent per week, the position you held, honors received, or letters earned. Also please indicate whether or not you plan to participate in college.

<i>Activity</i>	<i>Grade Levels</i>	<i>Hours/Week</i>	<i>Weeks/Year</i>	<i>Position/ Honors</i>	<i>Plan to Continue</i>

**WORK EXPERIENCE**

List any job (including summer employment) you have held during the past three years:

<i>Specific nature of work</i>	<i>Employer</i>	<i>Approximate dates of employment</i>	<i>Approximate # of hours spent per week</i>

**WRITTEN ESSAY**

Please attach a written essay (no longer than one page) describing how you think you can make a difference in our world through service, and how participating in community service will help you grow as an individual.

**APPLICANTS MUST FILL OUT ALL OF THE ABOVE REQUESTED INFORMATION AND SUBMIT THE REQUIRED DOCUMENTS LISTED BELOW TO BE CONSIDERED FOR A SCHOLARSHIP:**

- Copy of acceptance letter from Institution of vocational or higher education
- Letter of Recommendation from high school guidance counselor
- Written essay

Please send to the following address  
No later than **April 2, 2012**

The John Joseph Moakley Charitable Foundation, Inc.  
141 Tremont Street  
Boston, MA 02111  
Phone: 617-556-0244 Fax: 617-556-0284