

Phone (207) 785-3658

P.O. Box 186  
Union, Maine 04862

## TOWN OF UNION

*Office of Selectmen, Assessors, Town Clerk, Tax Collector and Treasurer*

### WILLIAM PULLEN SCHOLARSHIP

#### MINIMUM REQUIREMENTS:

1. Student is a resident of the Town of Union.
2. Scholarship is for post-secondary education or training.
3. High School transcript is to accompany the application of graduating seniors.
4. Most recent college transcript is to accompany the application of current college students.
5. **Three** letters of recommendation (non-relatives) are to be submitted with application. **One** should be from the **academic community** and **two** others should be from **local community sources**.

DEADLINE FOR SUBMISSION:           **MAY 15**

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

**LATE APPLICATIONS WILL NOT BE CONSIDERED.**

ALL APPLICATIONS AND SUPPORTING DOCUMENTATION ARE TO BE MAILED TO:

Board of Selectmen  
Town of Union  
P.O. Box 186  
Union, Maine 04862

APPLICATION FOR  
WILLIAM PULLEN SCHOLARSHIP

NAME: \_\_\_\_\_  
Last First Middle

RESIDENCE: \_\_\_\_\_  
Street Address (and Mailing Address, if different)

\_\_\_\_\_ Town State Zip Code Social Security Number

TELEPHONE: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

Are you currently a resident of the Town of Union? \_\_\_\_\_  
Yes or No

**GRADUATING SENIORS:**

**HIGH SCHOOL TRANSCRIPT IS TO BE SUBMITTED WITH APPLICATION OF GRADUATING SENIORS. THIS SHOULD ALSO INCLUDE CLASS STANDING.**

HIGH SCHOOL ATTENDED JUNIOR YEAR \_\_\_\_\_

SENIOR YEAR \_\_\_\_\_

DATE OF GRADUATION \_\_\_\_\_

HONOR ROLL? \_\_\_\_\_ If Yes, When? \_\_\_\_\_  
Yes or No

Have you been accepted to a school for further training or education? \_\_\_\_\_  
Yes or No

If Yes, give the **COMPLETE NAME, ADDRESS AND ZIP CODE OF THE EDUCATIONAL INTITUTION YOU PLAN TO ATTEND:**

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

Name of Program: \_\_\_\_\_ When will you start? \_\_\_\_\_

Will you be attending full-time or part-time? \_\_\_\_\_

**CURRENT COLLEGE STUDENTS**

**MOST RECENT COLLEGE TRANSCRIPT IS TO BE SUBMITTED WITH THE APPLICATION OF CURRENT COLLEGE STUDENTS.**

COLLEGE ATTENDED Freshman Year: \_\_\_\_\_

Sophomore Year \_\_\_\_\_

Junior Year \_\_\_\_\_

Name of Program \_\_\_\_\_

Dean's List? \_\_\_\_\_ If Yes, When \_\_\_\_\_  
Yes or No

## PULLEN SCHOLARSHIP

Enter current information (past two years) in the following categories.

AWARDS:

PROJECTS:

COMMUNITY ACTIVITIES:

EXTRA CURRICULAR ACTIVITIES:

SCHOLARSHIPS RECEIVED:

OTHER INFORMATION THAT YOU WOULD LIKE TO HAVE CONSIDERED.  
(Include volunteering, employment, and other accomplishments and pursuits.)

PULLEN SCHOLARSHIP

What are your educational and/or training goals?

Why should you receive this award?

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

PLEASE ATTACH:

\_\_\_\_\_ High School or College Transcripts

\_\_\_\_\_ Three letters of Recommendation