

Society of Mayflower Descendants in the State of Illinois Scholarship Application Form Submission Deadline: April 1

Applicant's Name:	
Address:	
City:	Zip Code:
Home Phone:	
Mobile Phone:	
email address:	
Applicant's High School:	
Address:	
City:	Zip Code:
Phone:	
Applicant's GPA: ACT/SAT Scor	es: Rank:
Academic Reference (Name):	
Applicant's College/University:	
Address:	
City:	Zip Code:
DI.	

Education Level Next School	Year:
Mayflower Sponsor:	
Mayflower Ancestor:	

PLEASE MAIL COMPLETED APPLICATION TO:

Linda Wingstrom 2975 Old Tavern Rd. Lisle, IL 60532

Or

EMAIL COMPLETED APPLICATION TO:

Linda Wingstrom: <u>lindawingstrom@gmail.com</u>

To be considered, the following documents must be submitted with this Memorial Scholarship Application Form:

- Academic statistics
 - Academic transcript
 - o GPA
 - ACT/SAT scores
- Academic reference provided by school official, teacher, academic advisor or counselor
- Essay concerning academic achievement, extracurricular activities, community service, financial need (if any), areas of interest and personal goals
- Brief letter from Mayflower sponsor in support of the applicant

An annual scholarship of \$2500 will be awarded by the Society of Mayflower Descendants in the State of Illinois based upon academic achievement, extracurricular activities, community service, and financial need.

If you have any questions concerning the above, please do not hesitate to contact the Scholarship Committee Chair, Linda Wingstrom, by phone at 630-357-3316 or by email at lindawingstrom@gmail.com.