

SOCIETY OF MAYFLOWER DESCENDANTS IN THE STATE OF OHIO #1
Scholarship Application Form

Name _____

Address _____

Contact Phone _____ Email _____

Month & year of high school graduation _____

Institution Attending and Address _____

Address: _____

Major field of Study _____ Current GPA: _____

Expected degree & graduation date: _____

Pilgrim Ancestor: _____ Applicant's State Society #: Jr. ___ Adult ___

Direct lineage connection to the Ohio Society (Name, address, relationship, Colony, General Society # & Ohio Society #) _____

Colony _____

Applicant's signature: _____

Instructions:

Please enclose two letters of reference. One should be from a professor or advisor. The other should be a character reference from a person not related to you. **Each person should print or type their name & address. The envelope must be sealed and mailed with the application and essay.**

The application mailed by you should include the following:

1. The scholarship **application**.
2. The **essay** should be no longer than 4 typed written pages, font # 12
3. **Sign the essay**.
4. Letters of reference as noted above.

Materials must be **Postmarked** by **February 10, 2022** and mailed to:

Dr. Donald N. Nichols, Chair, 2890 Margaretta Drive, Westlake, OH 44145-4674

Email address for questions: drdonrevsharon44@neo.rr.com