

**LITTLE COMPTON GRANGE #32**  
Organized May 30, 1894

Meetings 3rd Wednesday, 7:00 PM  
Seconnet Lodge Hall  
32 Hall St. Commons  
Little Compton RI 02837

One scholarship of \$500.00 is being offered by the Little Compton Grange to be known as "Awashonks", the queen of the Sogkonrites. This is to be awarded as follows: To a 2022 graduate of any high school who is a Little Compton resident or member of Little Compton Grange #32 or a family member and has been accepted for admission by a school of higher learning.

**Requirements:**

1. The award will be based on financial need, evidence of interest and ability to learn from further studies, participation in extracurricular and community activities and/or working experience, and scholastic standing.
2. Acceptance by an accredited post high-school educational institution including technical and/or vocational schools.
3. This completed application.
4. An official high school transcript of your course of study.
5. A copy of SAT/ACT scores.
6. Letter of recommendation from school personnel requested below.
7. Personal statement of education plans and goals.

**FOR you to be considered, this application and all documents must be sent on or before April 30, 2022 to: LITTLE COMPTON GRANGE #32 P. OF H. WALTER C. ELWELL SEC. 460-B LONG HIGHWAY LITTLE COMPTON, R.I. 02837-1819. TEL 401-635-4749.**

**This application will not be considered unless ALL documents are received by the above and ALL QUESTIONS ON THIS APPLICATION ARE ANSWERED.**

If you are chosen to receive this scholarship you will be notified and one half of the money will be forwarded to your college and on Jan. 1, 2023 will be sent to the college if you are returning. Please notify us if you are not returning.

APPLICANT'S NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

TEL NO.: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

COLLEGE ID#: \_\_\_\_\_

NAME OF HIGH SCHOOL: \_\_\_\_\_ : GRADUATION DATE \_\_\_\_\_

**APPLICANT'S FAMILY**

1. Father's Name: \_\_\_\_\_ LIVING? \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

2. Mother's Name \_\_\_\_\_ LIVING? \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Guardian's Name (if other than above): \_\_\_\_\_

3. Name(s) of Brother(s) and or Sister(s): \_\_\_\_\_ Age \_\_\_\_\_ Occupation \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Name and Address of University, College or School you plan to attend. (If undecided, list possible schools) (Also address where check should be sent)

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

Have you been accepted?: \_\_\_\_\_ : Course, Programs, or Major: \_\_\_\_\_

No. of Years: \_\_\_\_\_ : Degree: \_\_\_\_\_ : Certificate: \_\_\_\_\_

5. Do you plan to live at home? \_\_\_\_\_ : On campus? \_\_\_\_\_ : Off campus? \_\_\_\_\_

If living at home, how will you commute? Own Car \_\_\_\_\_ : Ride with someone \_\_\_\_\_ :  
Other \_\_\_\_\_

6. List your employment experience:

Type of Job	Your Job	Location	Years
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**7. List School and Community Activities in which you have participated:**

**Organization**

**Office Held**

**Years**


**8. Financial information (to be completed with aid of parents).**

a. School expenses for next year \$ \_\_\_\_\_

b. Applicant's resources to meet expenses \$ \_\_\_\_\_  
Family contribution \$ \_\_\_\_\_

c. Explain what you have done to help earn money and how much of this have you saved toward your college expenses?


9. Other Scholarships for which you have either applied and/or received. Do not hesitate to put these down as it shows you have been trying to get money for your education. You can still get this scholarship if you have received other scholarships and are eligible.

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

10. Signature of Parent or Guardian

\_\_\_\_\_ : Date: \_\_\_\_\_

Signature of Guidance Counselor supporting this application

\_\_\_\_\_ : Date: \_\_\_\_\_

11. Explain your need for financial assistance below. (also use this page or another to furnish any further information that you feel the Scholarship Committee should take into account when considering this application). You may use an attachment.

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

12. Signature of Student

\_\_\_\_\_ : Date: \_\_\_\_\_

