

The Horace Smith Fund
WALTER S. BARR FELLOWSHIP APPLICATION
(For residents of Hampden County pursuing full time graduate studies after college graduation.)

Completed applications must be received in the Horace Smith Fund office no later than **March 15th**.

I. PERSONAL DATA

1) Name Mr. or Ms.
(First Name) (Middle Name or Initial) (Last Name)

2) Permanent Address

City, STATE, Zip

Present Mailing Address (if different)

3) Email Address

4) Telephone

5) High School

Dates of attendance

6) Undergraduate college or university

Dates of attendance

Major course of study

If you attended more than one college or university for undergraduate studies, please complete:

Undergraduate college or university

Dates of attendance

Major course of study

II PERSONAL STATEMENT

Why do you consider yourself to be a good applicant for the Walter S. Barr Fellowship? Please attach a sheet of paper and tell the Committee about yourself, your interests, purposes and activities. Include any other matters which may have a bearing on this award. Provide your thoughtful response, including the impact on finances of attending graduate school to you and your family. Include your most significant achievements, academic interests, and the reasons that have led to your education and career goals. (If more space is needed, use an additional sheet of paper.)

III GRADUATE ENTRANCE

1) If you have done any graduate work thus far, please complete:

Graduate college or university

Dates of attendance

Major course of study

2) Future plans for graduate work, including course of study and start date

3) In order of preference, list the colleges that you have applied to for graduate admission:

Graduate College	Date of Application	Accepted?
.....
.....
.....
.....

4) Graduate entrance examinations or similar tests taken

Name of test Date of tests

IV ADDITIONAL INFORMATION

1) If your education has been interrupted, please indicate what you were doing when not attending college

2) Describe prizes, academic distinctions, or awards of merit you have received or areas of accomplishment in art, sports, music, community involvement, etc.

V REFERENCES

List three persons, not relatives, whom you have asked to be your references. At least two references should be from academic advisors or professors, who are familiar with your ability and potential. (This is for informational purposes only. Reference forms are not sent automatically.)

Name and Title	Mailing Address
	Email Address
1)

2)

3)

PERSONAL FINANCES

1) Complete the following information for the most recent year:

Your Employer and Position

Employer's Address

Your Annual Wages, Salary or Tips

A \$

Your Spouse's Employer and Position

.....

Employer's Address

Spouse's Annual Wages, Salary or Tips B \$

Gross Income from Other Sources C \$

Gross Income Provided by Other Family Members D \$

TOTAL ANNUAL INCOME (Add A + B + C + D)

2) Using the official cost estimates for your first college choice, complete the following projections for your **next** year:

Graduate college name and location

<u>Your expenses</u>		<u>Your resources</u>	
Tuition	\$.....	From your savings	\$.....
Fees	\$.....	From parents or others	\$.....
Room & Board	\$.....	Earnings	\$.....
List other expenses:		College aid: Grants	\$.....
.....	\$.....	Work/study	\$.....
.....	\$.....	Loans	\$.....
.....	\$.....	List other resources:	
.....	\$.....	\$.....
.....	\$.....	\$.....
TOTAL EXPENSES	\$.....	TOTAL RESOURCES	\$.....

3) List and explain any recent unusual or unexpected expenses or income.

4) List the current values for assets and unpaid balances of liabilities for the following items:

ASSETS

Cash (include bank and money market accounts, CD's)	A	\$
Marketable Securities (stock, bond, mutual funds)	B	\$
Market Value of Real Estate	C	\$
Other Assets (include autos, etc.)	D	\$
Retirement Funds (IRA's, 401k, annuities)	E	\$
TOTAL ASSETS (A + B + C + D + E)		\$

LIABILITIES

Real Estate Mortgage Debt	F	\$
Secured Loans (autos, etc.)	G	\$
Unsecured Loans (educational, credit card debt, etc.)	H	\$
Other Liabilities	I	\$
TOTAL LIABILITIES (F + G + H + I)		\$

5) Include below any additional information that you would like the Selection Committee to be aware of regarding your ability to pay for your educational and personal expenses during the next academic year.

Send this completed form to:
The Walter S. Barr Fellowship Committee
The Horace Smith Fund
16 Union Avenue, Ste. 2K
Westfield, MA 01085

Date (Signature of Applicant)