

CHAUNCEY B. WARNER MEMORIAL SCHOLARSHIP

The Chauncey B. Warner Memorial Scholarship Fund was established in June 1986 by the Board of Managers of the Warner Home for Little Wanderers, Inc., as a memorial to his many years of dedicated service to needy children of Franklin County. The dictum of Mr. Warner was "To enrich the environmental background of the child, thereby enabling the child to progress emotionally, socially, and intellectually. This development will aid the individual in the improvement of his or her self-image and goals for adult life."

In keeping with this philosophy, the Board of Managers may award scholarships:

- for as much as \$4,000.00 each.
- to as many as 15 students each year (determined by the funds available to the Scholarship Committee).
- to Franklin County residents under the age of 21.
- to students who have been accepted to a post-secondary undergraduate program (**associate degree, bachelor's degree, technology program, or other advanced training**).

Payment of the scholarships will be made directly to the student's school/program of choice from the Chauncey B. Warner Scholarship Fund upon satisfactory proof of enrollment.

***Please note**, eligibility for the Chauncey B. Warner Scholarship is determined by the family's income based on low-income guidelines set by the federal government. Special consideration is given to financial need, academic achievement, extra-curricular activities, community involvement, and initiative.

In addition to graduating high school seniors, open for consideration for this scholarship are Franklin County residents under the age of 21 who have taken a gap year or have obtained their high school equivalency by other means.

To: Eligible Students

Re: Chauncey B. Warner Scholarship

Application Deadline: **May 1, 2025**

Items to be included in your application package:

- One (1) complete copy of your parent(s)/guardian(s) latest U.S. Income Tax Return **listing you as a dependent**.
 - If you are no longer listed as a dependent on your parent(s)/guardian(s) U.S. Income Tax Return, please provide a copy of your most recent U.S. Income Tax Return.
 - Please redact (white out) Social Security Numbers. **This is important to protect and secure your personal information.**
- One (1) copy of your application form, including your essay (300 words).
- One (1) copy of your transcript.
- Letter(s) of recommendation.

Please note that these scholarships are based on financial eligibility (low income) and can be awarded for any post-secondary goals, **including two-year, four-year, or trade schools.**

Please mail/deliver your completed application by **May 1st**.

MAIL

Chauncey B. Warner Scholarship
215 North Main Street
St. Albans, VT 05478

EMAIL

warnerhomescholarships@gmail.com

Questions? Email: warnerhomescholarships@gmail.com

CHAUNCEY B. WARNER
MEMORIAL SCHOLARSHIP APPLICATION

Deadline Date: May 1, 2025

SEE ATTACHMENT REGARDING ELIGIBILITY REQUIREMENTS

Name: _____

Home Address: _____

Phone Number: _____

Applicant Email: _____

Current High School or Method By Which You Acquired Your High

School Equivalency: _____

County You Reside In: _____

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- Letter(s) of recommendation.

A. Name and location of institution/program you plan to attend.

B. What your field of study will be.

C. Class Rank/GPA/or other indicator of your academic achievement. _____

D. How many children in your family _____? How many attending college _____?

E. Ways you are contributing to the costs of your education _____

F. Estimate of total Tuition and Expenses _____

G. Please list of all your extracurricular high school/community activities:

- Clubs _____
- Sports _____
- Work _____
- Volunteering _____
- Community Involvement _____
- Other _____

H. A **typed** essay (**300 words**) answering one of the following prompts
(**Include the prompt you chose at the top of your essay**):

- My career goals and future plans
- My passion and how it will be a part of my future
- My community and how it will be a part of my future

I affirm that to the best of my knowledge the information requested on this application is accurate.

Release and Hold Harmless: The Participant and Parent/Guardian hereby release and forever hold harmless "The Warner Home For Little Wanderers" (the "Organizer"), its directors, officers, employees, volunteers, and agents

(collectively, the "Released Parties") from any and all claims, demands, losses, or liabilities arising out of or in any way connected with the Participant's attendance at the activity chosen by your family/ child. This includes, but is not limited to, claims of personal injury, illness, property damage, or wrongful death.

Signature of Applicant: _____

Signature of Parent/Guardian: _____