## **BUXTON FAMILY ASSOCIATION**

## MARY BUXTON CHURCH SCHOLARSHIP APPLICATION

Please fully complete the application, including required documents. Complete applications must be submitted and postmarked by **June 1, 2023**.

Return to: Donna Buxton Munroe, Scholarship Chairperson

24 Pond View Road

Bolton, Connecticut o6o43 email: donna.munroe@att.net

## PERSONAL INFORMATION:

Applicant's Name	:				
	Last		First	Middle	
Mailing Address:					
Ü	Street		City	State	Zip
Telephone:			email:		
Date of Birth:			_ SSN#	ncome tax purposes)	
Parent's Name:			*	,	
Parent's Address:					
	Street	City		State	Zip
EDUCATIONAL	INFORMA	TION:			
High School:					
_	Name			Graduation Date	
$\overline{\mathrm{Add}}$	ress				

College or Tec	hnical/Trade Sc	hool:	
N	ame		
Ā	Address		
M	Iajor/Program	Date of Acceptance	Date of Graduation (Anticipated)
BUXTON FAM	MILY INFORMA	ATION:	
	'A Scholarship h hip to the Buxto	py n Family Association	
•	OOCUMENTS: h your application for	<b>rm</b> )	
2-Summary tra 3-Short descri	acing you and yo ption of your car	ur family line back to An reer goals.	chool you plan to attend. thony Buxton, <u>The Pioneer.</u> <u>nd semester</u> following award of a
recipient's gra	des is required	-	FFICIAL college transcript reporting ory academic progress. Upon receipt of holarship.
Applicant's Sig	gnature		Date
THIS AREA RE	SERVED FOR SO	CHOLARSHIP COMMITTE	E RECORDS:
COLLEGE ACC	CEPTGOAL	SAPP ACKNOWLEDG	NSCRIPT EDSTATUS ACKNOWLEDGED ECK ISSUED