

BEVERLY ROTARY CLUB FOUNDATION

JACK GOOD SCHOLARSHIP APPLICATION 2025

PERSONAL INFORMATION

Name
First Name Last Name
Date of Birth
Month Day Year
Phone Number
E-mail
Enter E-mail Here
Address



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Dio you reside in Beverly, MA?
Residency in Beverly, MA is a requirement for eligibility
EDUCATIONAL BACKGROUND
1- Do you have a high school diploma or high school equivalency certificate (this is a requirement for eligibility)? Zip Code Yes No
If yes, please provide the following:
Name of High School or Institution:
Year of Graduation or Completion
2- Do you have an associate's or bachelor's degree? Yes No
If yes, please provide the following:
Name(s) of Institutions:
Year(s) of Graduation or Completion:



Degree Obtained:

PROGRAM INFORMATION

1- Name of the Program/Course you wish to attend:
2- Institution Name:
3- Program/Course Type (Degree, Certificate, etc):
4- Start Date (if known):
5- Total Cost of the Program in \$:
6- Amount of Funding You Are Seeking from this Scholarship in \$:
7- Have you applied or been accepted into the program? Yes No
If no- please explain your timeline for applying.



EMPLOYMENT AND EXPERIENCE

1- Current Occupation (if available):
Job Title:
Employer:
2- Briefly describe your prior work, education and/or community activities (300 words max):
0/300
LETTERS OF RECOMMENDATION/SUPPORT
Please submit two letters of recommendation or support from individuals who are familiar with your circumstances, prior work, education and community activities.
Recommender 1:
Name
First Name Last Name
Relationship to Applicant:
Email



Phone Number
Please enter a valid phone number. example@example.com
Recommender 2:
Name
First Name Last Name
Relationship to Applicant:
Email
example@example.com
Phone Number

FINANCIAL NEED

Please enter a valid phone number.

1- Please provide a statement of financial need (300 words maximum). Describe your current financial situation, including any financial challenges that may impact your ability to attend this program. Explain why you are seeking financial assistance and how receiving this scholarship would help you achieve your educational goals.



Statement of Financial Need:	
0/300	
2- Do you have any other sources of financial assistance (scholarships, loans, etc) for this program?	
Yes No	
If yes, please provide details about the funding sources and amounts.	
PERSONAL STATEMENT	
In 500 words or less, describe your personal story, including why you are applying for this scholarship, how this scholarship will impact your future educational goals, and any challenges you have overcome as a nontraditional student:	
0/500	

SUBMISSION INSTRUCTIONS

Please make sure you submit a completed application form with the following:
1. Copy of your high school diploma/equivalency certificate
2. Two letters of recommendation/support



- 3. Statement of financial need
- 4. Proof of application or acceptance (if available)
- 5. Documentation of the details of the course you are requesting financial assistance with (such as the catalog listing which includes institution, course description, date and cost)

If filling this form via PDF and not online, please do make sure to attach these items to your email or in your form package.

Please note that applications that are incomplete or missing may not be considered. The deadline for

applications is: **NOVEMBER 14, 2025**

If you have questions about the application form or scholarship, please reach out to:

Lori Cianculli- Beverly Rotary Club Scholarship Chair

Email Address: lac@candolawyers.com

Mailing Address: 163 Cabot Street, Beverly MA 01915

Phone: 978-922-9933

APPLICANT CERTIFICATION

I hereby certify that all the information provided in this application is true and accurate to the best of my knowledge.

Date

Month Day Year

