

**DESCENDANT SCHOLARSHIP
in Memory of Amy Roe Barnes
Application Form**

The Chester Alumni Association is offering a financial award to a descendant of a graduate of Chester Academy/High School. The applicant need not be a student of the Chester School District. The award is \$400.00. The recipient of this award will be selected from the applications submitted and postmarked by **May 1st** of the current year.

The senior granted the scholarship will receive the funds once the following conditions have been met.

- 1). Complete your 1st year of college (2 semesters) as a full time student.
- 2). Register for your 2nd year as a full time student.
- 3). Submit proof of both of the above (grade reports, receipts, or letter from registrar) by June 15th following your first year to:

Chester Alumni Association,
PO Box 544
Chester, NY 10918

- 4). Include your current and complete name, address, and phone number. Failure to do so may result in loss of award.

Please complete the attached application in full and return to us by May 1st of the current year.

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Name: _____ Graduation Date: _____

Address: _____

Email address: _____

Phone# : _____

(Please put the email address and phone number you will be using since this will be used to contact you regarding your scholarship)

Father/Guardian's Name: _____

Mother/Guardian's Name: _____

Name of siblings in college and where attending:

Name and Address of High School: _____

Phone #: _____ Contact Person: _____

Please list any extra curricular activities you have participated in:

Please list any community service you have participated in:

Please list College or colleges (if undecided at time application) you plan to attend:

If there is any further information you would like to share with us regarding your future plans, accomplishments, family or any special circumstances, that would help us in reaching a decision, please attach a brief essay.

Name of the Chester Alumni to whom you are related to;
_____ Class of _____
Relationship _____

Your application for this scholarship is dependent upon the following:

- 1). Your relationship to a Chester High School Graduate.
- 2). Please provide, in typed format, a short document where you briefly relate a story you have been told or an experience that has been shared with you by your relatives about their years at Chester High School. (You can have some fun with this!)

Signature of Student: _____ Date: _____

Signature of Parent: _____ Date: _____