

**BOSTON DEMOCRATIC SOCIAL CLUB**  
**2021 SCHOLARSHIP**  
**recipient receives \$500.**  
**APPLICATION**

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE(s)** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**DATE OF GRADUATION** \_\_\_\_\_

**ORGANIZATION MEMBERSHIPS, LENGTH OF MEMBERSHIP, OFFICES HELD** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**COMMUNITY SERVICE**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**COLLEGE OR CAREER/TECHNICAL PROGRAM YOU WILL BE ATTENDING**

\_\_\_\_\_

**CONTACT INFORMATION FOR THAT INSTITUTION**

\_\_\_\_\_

\_\_\_\_\_

**START DATE**

\_\_\_\_\_

**CAREER**

**PLANS** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SIGNATURE OF APPLICANT** \_\_\_\_\_

**SIGNATURE OF PARENT OR GUARDIAN IF APPLICANT IS UNDER 18 YEARS OF AGE**

\_\_\_\_\_

**DATE** \_\_\_\_\_

Additional information can be added on a separate page if necessary.

**RELEASE OF INFORMATION FOR BOSTON DEMOCRATIC SOCIAL CLUB SCHOLARSHIP**

**I, hereby, grant permission to the Boston Democratic Social Club any of the information that I have provided on the scholarship application or in the attached essay.**

**SIGNATURE OF APPLICANT**

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**DATE**\_\_\_\_\_

**SIGNATURE OF PARENT OR GUARDIAN IF APPLICANT IS UNDER 18 YEARS OF AGE**

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**DATE**\_\_\_\_\_

## **BOSTON DEMOCRATIC SOCIAL CLUB SCHOLARSHIP APPLICATION**

**Applicant must graduate in 2021 and be a resident of the Town of Boston**

**To be considered, applications must be post-marked on or before May 20, 2021 and include all the requested documents. Decision will be made on or before June 10, 2021. Recipient will be notified then, and should notify the Boston Democratic Social Club what school or career program should receive the \$500. Scholarship check.**

**Please submit the completed application to:**

**Barbara Moore  
The Boston Democratic Social Club  
7004 Liebler Rd.  
Colden, NY 14033**

**Include with the completed application form:**

- 1. Two letters of reference from non-family members.**
- 2. A statement of 300 words or less explaining what it means to the applicant to live in the Town of Boston.**
- 3. Signed release allowing the BDSC to publish the scholarship recipient's name and parts of the submitted statement.**

**If you have any questions concerning the application please contact  
Barbara Moore at 716-912-2100  
E-mail: [allscrabbleallthetime@roadrunner.com](mailto:allscrabbleallthetime@roadrunner.com)**

