

## Domingos T. Silva Family Scholarship Fund

The Domingos T. Silva Family Scholarship awards scholarships to graduates of “any Secondary (High) School accredited by the New England Association of Schools and Colleges, Inc., located in New Bedford, Fairhaven, Freetown, Westport, Acushnet or Dartmouth, Massachusetts, or ... of students who graduated from a similarly accredited High School located outside said communities, but who are themselves residents of these communities” and who are pursuing a four-year college degree. Assistance may be extended beyond a single year at the discretion of the scholarship committee.

The applications must include:

- (i) An official copy of the student’s most recent transcript.
- (ii) An autobiographical sketch of yourself, including future ambitions, goals and dreams not to exceed 300 words more or less.
- (iii) At least one academic reference from a teacher or instructor. This must be written as recently as possible, and no longer than six months before the application is filed.
- (iv) Parents (or Guardian’s) first page of the FAFSA form.

**Awards are based on: Financial Need & Scholastic Merit**

Applications are available from the Scholarship Committee at the applicable location:

<p>For residents of Dartmouth</p> <p><b>Dartmouth High School</b> Guidance Office 555 Bakerville Road Dartmouth, MA 02748</p> <p><b>Bishop Stang High School</b> Guidance Office 500 Slocum Road North Dartmouth, MA 02747</p>	<p>For residents of New Bedford</p> <p><b>Greater New Bedford Regional Vocational Technical High School</b> Guidance Office 1121 Ashley Boulevard New Bedford, MA 02745</p> <p><b>New Bedford High School</b> Guidance Office 230 Hathaway Boulevard New Bedford, MA 02745</p>
<p>For residents of Fairhaven</p> <p><b>Fairhaven High School</b> Guidance Office 12 Huttleston Avenue Fairhaven, MA 02719</p>	<p>For residents of Westport</p> <p><b>Westport High School</b> Guidance Office 19 Main Road Westport, MA 02790</p>

Applications are also available at Apponequet Regional High School, Guidance Office.

Residents of New Bedford, Fairhaven, Freetown, Westport, Acushnet or Dartmouth, who attend a High School outside these communities, may send the application to: Bank of America, Attn: Nancy Hungerford, 99 Founders Plaza, CT2-547-05-19, East Hartford, CT 06108.

**Application Deadline is May 1 and scholarship award decisions are made by June 1.**

Students wishing to extend assistance beyond a single year, must re-apply to be considered.

Please note award checks are payable to the college and mailed directly to the institution.

**DOMINGOS T SILVA FAMILY SCHOLARSHIP FUND  
APPLICATION FORM**

**PLEASE PRINT OR TYPE**

Name: \_\_\_\_\_

Present Address: \_\_\_\_\_

Permanent Address (If Different): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

1 Name of High School: \_\_\_\_\_

2 High School GPA: \_\_\_\_\_

3 Gross Income (most recent calendar year): \_\_\_\_\_

4 From what source(s)? \_\_\_\_\_

5 What are your present means of financial support? \_\_\_\_\_

6 Will this support continue while you are in college? \_\_\_\_\_

7 College you plan to attend/currently attend: \_\_\_\_\_

8 Estimate your expenses for: a) Tuition & Fees \_\_\_\_\_

b) Books \_\_\_\_\_

c) Commuting \_\_\_\_\_

d) Other (please specify) \_\_\_\_\_

9 Other financial aid will you receive / applied for? \_\_\_\_\_

10 Major course of study: \_\_\_\_\_

11 Anticipated College Graduation Date: \_\_\_\_\_

## DOMINGOS T. SILVA FAMILY SCHOLARSHIP FUND

Supplemental form to be completed by parent (or guardian).  
Please include information for both parents unless not applicable.  
**Parents are required to provide the first page of the FAFSA form.**

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Gross Annual Income from Earnings: \_\_\_\_\_

Employer Name / Address: \_\_\_\_\_

Position Held: \_\_\_\_\_

Other Income: \_\_\_\_\_

Children / Other Dependents & DOB: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Gross Annual Income from Earnings: \_\_\_\_\_

Employer Name / Address: \_\_\_\_\_

Position Held: \_\_\_\_\_

Other Income: \_\_\_\_\_

Children / Other Dependents & DOB: \_\_\_\_\_

To the best of my knowledge, the facts submitted above and on the accompanying application are complete and correct.

\_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_  
Parent or Guardian