

The Head of Guidance Department/Scholarship Coordinator:

The family and friends of Mark Bavis have established a foundation in Mark's name to preserve his memory and to perpetuate the principles by which he lived every day and through which he touched the lives of many. Mark's work ethic helped him accomplish so much in such a short time. He was one of those quiet leaders who led by service and example.

September 11^{th} , 2001 changed our lives forever. We are determined to create something good and lasting out of this tragedy. We are confident that Mark's spirit will endure and continue to enrich the lives of many.

We want to be certain that Mark is remembered by those who knew him and appreciated by those who never go the chance to do so. Our hope is that the Mark Bavis Leadership Foundation will allow deserving young men and women to enjoy opportunities and experiences like those which contributed to making Mark the person that he was.

We will accomplish this by providing selected recipients with annual grants ranging from \$1,000 to \$5,000 to be used as specifically requested for school tuition, summer programs and other appropriate extracurricular activities.

Any high school student in the Commonwealth of Massachusetts is eligible. The scholarship is not academically based, but is awarded based on need. The committee is looking for exceptional leaders and people who have proven this leadership within their school. In addition, the committee will give more serious consideration to those students who have made efforts to make a difference in their communities.

Please distribute the enclosed applications to those students that you believe are outstanding candidates or this year's scholarships. It is our hope that all candidates return their applications prior to **March 15th**, **2026**, so that the committee can make their decision and notify the winners prior to May 15th 2026. Any assistance that you can provide in steering the right candidates to the Mark Bavis Leadership Foundation is greatly appreciated.

Any questions can be directed to Mike Bavis @617-851-7420 or Patrick Bavis @617-212-0340 or email pbavis@pecofct.com



Name	Date _			
Address —————————	City _		State	Zip
Country —	Home	Phone ————		
Birth Date ————————————————————————————————————	Email -			
Mother's Name	Email			
Father's Name				
Brother(s)/Sister(s) & Ages				
Brother(s)/Sister(s) attend High School or College at				
Name of High School				
Address	City		State	Zip
GPA (4.0 Scale)			Verbal	Math
List your favorite hobbies 1	2		3	
Who inspires you to lead and serve				
On a separate sheet of paper, please describe how you				
Financial Aid Application — Parent or	Legai Guai	nan imormatio	1	
Dependents, Age and Relationship				
Who else lives in your household				
Residence	Own	Single Family	Own Multiple Fam	nily Rent
Gross income for the previous year		Expenses		
Wages and salaries		_ Medical (include insura	nce)	
Income from other sources	Rent or Monthly Mortgage (Including Principal, Interest, and Taxes)			
		Refit of Monthly Mongage (Including Principal, Interest, and Taxes)		
		Tuition-Day School		
		Parochial School		
		Child Care		
		Number of Cars		
		-		Year
Total Gross Income		Outstanding Loans		
		Total Monthly Loan	Payments	
		Total Expenses		
How much do you feel that you can afford toward tuition?				
Please describe any special circumstances that affect you				
ignature of Adult Date				