VERMONT STATE FIREFIGHTERS ASSOCATION

GERORGE S. GIBBY SCHOLARSHIP FUND
SCHOLARSHIP APPLICATION

PLEASE TYPE OR PRINT AND ANSWER ALL QUESTIONS

APPLICANT INFORMATION

Name _____
First Middle Last

Address _____ Phone _____

City / Town _____ State _____ Zip _____

Date of Birth _____ Social Security No. _____

High School _____ Date of Graduation _____

Current Employer _____ Job Title _____

Employers Address _____

No. of years of VSFA Membership _____ Organization _____

EDUCATIONAL PLANS

_____
College / University / Institution you plan to attend Location

_____
Major Course of study you plan to pursue.

FINANCIAL INFORMATION

Briefly discuss any circumstances which affect your or your family's ability to pay for educational expenses; i.e., unusual debts, family size, loss of work, etc.

CERTIFICATION

TO THE BEST OF MY KNOWLEDGE I CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS COMPLETE AND ACCURATE.

Applicant Signature: _____ Date: _____

Officer's / supervisor's Signature: _____ Date: _____

REQUIRED ATTACHMENTS

1. An official copy of a high school transcript.
2. A letter of recommendation/accomplishments from a supervisor/chief officer.
3. Proof of membership in the Vermont State Firefighters' Association.
4. Details on the collegiate program that you are/will be attending. Must include study of fire science or emergency medical services or a related field.

Mail Application To:
Richard Harrison, Chairmain
VSFA Gibby Scholarship Committee
95 Main Street
Ludlow, VT 05149

Application Deadline: June 15th

Form Revised 5/7/10