



The Frozen & Refrigerated Association of the Northeast (FRANE)  
**2018 Scholarship Award Program**  
**Confidential Scholarship Application Form**

**Please note:**

- Applicants must complete (please type) all **4 pages** of the FRANE Scholarship Application.
- It is the applicant's responsibility to insure that his/her Scholarship Application is complete.
- The FRANE Scholarship Committee will **NOT** process any applications that are incomplete.

Go to [www.frane.org/scholarship](http://www.frane.org/scholarship) to download a copy of the FRANE Scholarship Guidelines and all required forms, including the 2018 FRANE Application and the Transcript Information Form (high school students only). You may also call the FRANE office at 203-597-7215 to request the Scholarship Application Forms.

**Print your name:** \_\_\_\_\_

1. **FRANE Application Form:** Please complete and submit pages 1, 2, 3, 4. (The checklist on this page is provided so that you can make a check next to each item to confirm that you have included each required section of your application in your envelope.) Page 4 must be signed and dated by the applicant.
2. **Essay (250-500 words typed):** Your essay should be about a charitable experience, achievement, or risk that you have taken and its impact on you and should not have been used in a previous submission. Submit your essay with your application.
3. **Listing of your extra curricular activities in a resume format:** Include clubs, sports, community service, work experience, etc. Submit your listing form with your application.
4. **High School Students:** Official Transcript of grades (with high school seal) and **SAT and/or ACT scores** – must include 2017-18 1<sup>st</sup> semester grades. **Minimum requirement: B- or 2.8 GPA.**

When complete, check the following:

\_\_\_\_ My Official Transcript **and** the Transcript Information Form are enclosed.

5. **College Students:** Official Transcript of grades (photocopies are not acceptable) – must include 2017-18 1<sup>st</sup> semester grades. **Minimum requirement: 2.8 GPA.**

When complete, check the following:

\_\_\_\_ My Official Transcript is enclosed.

**Questions?** Contact the FRANE office by telephone (203-597-7215) or email ([frane@frane.org](mailto:frane@frane.org)).

**Your application must be postmarked by April 30, 2018. (Do not fax your application.)**

**Mail your application to the FRANE office at:**  
**PO Box 6377, Wolcott, CT, 06716.**

Scholarship winners will be notified by mail by July 30, 2018.  
Names of winners will be posted on the FRANE website at [www.frane.org](http://www.frane.org) on or after July 30, 2018.

Please print legibly or type all entries in this application.

**A. APPLICANT ELIGIBILITY:**

To be eligible for consideration for a FRANE scholarship, the applicant or an immediate family member (mother, father, grandparent, sister, brother, spouse or guardian) of the applicant must be an employee of a FRANE member company, have direct responsibility for the Northeast Market **and** be employed by the member company from the date of the applicant's application through June 1, 2018.

1. Are you (the applicant) an employee of a FRANE member company?  Yes  No

If you selected No above, please complete a and b:

a. My mother / father / grandparent / sister / brother / spouse/ guardian is employed by a FRANE member company.

Circle one or more of the above

b. My family member's name is \_\_\_\_\_  
first name last

2. **Required:** The name of the FRANE member company that you (or your family member) work for is:

Member Company Name \_\_\_\_\_ Tel. # (\_\_\_\_) \_\_\_\_\_

Member Company Address \_\_\_\_\_  
street city state zip

Please call the FRANE office at 203-597-7215 if you have any questions about the above or check our website for a current listing of FRANE member companies.

**B. APPLICANT INFORMATION:**

1. Applicant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

2. Legal Permanent Address: \_\_\_\_\_

3. City, State, Zip: \_\_\_\_\_

4. Mailing Address (if different from above): \_\_\_\_\_

5. Telephone: Home-(\_\_\_\_) \_\_\_\_\_ Cell-(\_\_\_\_) \_\_\_\_\_

6. Email Address: \_\_\_\_\_

7. Applicant's Marital Status:  Single  Married  Divorced  Widowed

8. Do you have any children/dependents?  Yes  No

**C. HIGH SCHOOL/COLLEGE INFORMATION:**

1. Name and city/state of the high school or college that you are presently attending:  
\_\_\_\_\_

2. **High school students:** Give the name and telephone # of your guidance counselor:  
\_\_\_\_\_

3. In **September 2018**, what year will you be in college: freshman sophomore junior senior  
Circle one of the above

4. In **September 2018**, will you be a full or part time student: full time part time  
Circle one of the above

**D. APPLICANT'S WORK HISTORY:**

1. Are you currently employed?

- a.  Yes, I work an average of \_\_\_\_\_ hours per week. *Proceed to #2.*
- b.  For college students. I work \_\_\_\_\_ hours per week during semester breaks only. *Proceed to #2.*
- c.  No, I do not have a job for this school/academic year. *Skip to #5 below.*

2. Company Name and address of current employer:  
\_\_\_\_\_

3. Company Telephone #: \_\_\_\_\_ Duties: \_\_\_\_\_

4. When (month/year) did you begin this employment? \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_

5. **During the summer**, I plan to work an average of \_\_\_\_\_ hours per week.

No plans for a summer job. If you will **not** have a summer job, please explain why \_\_\_\_\_  
\_\_\_\_\_. (Please skip to section E)

*Please give details, as best you can, of your summer employment plans:*

6. How many weeks will you work this summer? \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_

7. Company Name, address of summer employer (or other details regarding summer employment plans):  
\_\_\_\_\_

8. Company Telephone #: \_\_\_\_\_ Duties: \_\_\_\_\_

**E. APPLICANT'S FAMILY INFORMATION:**

Are you listed as a dependent on your parent(s) or guardian's tax return?  Yes  No

1. Applicant resides with (select all that apply):

mother  father  stepparent  other \_\_\_\_\_

2. Father's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

3. Father's Address: \_\_\_\_\_  
street city state zip

4. Father's Employer: \_\_\_\_\_  
Name of Employer city state

5. Mother's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

6. Mother's Address: \_\_\_\_\_  
street city state zip

7. Mother's Employer: \_\_\_\_\_  
Name of Employer city state

8. List names, ages, and school/college attending of brothers and sisters currently living at home:

Name	Age	School/College Attending	Grade/Year
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**F. FINANCIAL INFORMATION:**

1a. **If you are a high school senior**, list the colleges/universities to which you have applied. Include estimated total cost (including tuition, room and board, fees and books) and your anticipated major.  
(List your top 4 college choices *or* attach a separate sheet giving the following details for the colleges to which you have applied.)

Name of College	Total Cost	Major
_____		
_____		
_____		
_____		

1b. **If you are currently attending college**, list the name of the college you will be attending next year, your major, and the estimated cost of next year’s expenses (including tuition, room and board, fees and books).

\_\_\_\_\_

2. List names and amounts of any other private scholarship assistance/financial aid that you have applied for:

\_\_\_\_\_  
\_\_\_\_\_

3. Have you completed all financial aid applications (including the FAFSA) for your college(s) for the 2018-2019 academic year?  Yes  No If no, please explain:

\_\_\_\_\_

**4. Estimate of funds available:**

- a. As of May 31, 2018, what do you (applicant) anticipate that you will have available in funds for college expenses from checking/savings and current employment? \_\_\_\_\_
- b. As of August 31, 2018, what do you (applicant) anticipate that you will have available for college expenses from 2014 summer employment? \_\_\_\_\_
- c. As of August 31, 2018, what funds do you anticipate receiving from your parents or other family members to assist with your college expenses? \_\_\_\_\_
- d. How much do you expect to earn from September 2018-June 2019 through the College Work Study Program or other school year employment? \_\_\_\_\_
- e. What is the amount of financial aid (grants) from the college that you expect to receive for 2018-2019? \_\_\_\_\_
- f. What is the amount of all loans that you or your parents expect to borrow for 2018-2019 (including from the college)? \_\_\_\_\_
- g. Give the total amount of any known scholarship aid from any other sources. \_\_\_\_\_

**Estimated Total Funds Available:** \$ \_\_\_\_\_

**G. CERTIFICATION:**

I hereby declare that the information stated in the above application is accurate and truthful.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Please note: Be sure to submit your essay and the resume of your High School or College Extracurricular Activities (clubs, sports, community service, employment, etc.) with your application.**