

20 ----- APPLICATION FOR----- 20

Maine State Federation of Fire Fighters Scholarship Programs

E-Mail to: Maine State Federation of Fire Fighters lisa.archer@maine.edu

Mail to: Lisa Archer; MSFFF Treasurer; 16 Perry Dr. Dresden, ME 043421

!!! See Attached "SCHOLARSHIP PROGRAM/CRITERIA" Information Sheet!!!

APP LICANT INFORMATION		
Name:		Current Year Member/MSFFF: Date?: Enrolled with _____ Fire Dept. County:
Address:		State: Zip:
Phone: Day	Evening:	Email:

Application Criteria (Write briefly, use reverse side or attach sheet/narrative)

Personal Goals:

Anticipated Community & Fire Service Benefits:

Financial Need:

Fire Chief Endorsement (REQUIRED) (Attach Letter if Desired)

I, _____ Chief of _____ Fire Department,
endorse and support this applicant's efforts.

Fire Chief's Signature: _____

Staff Use Only:

Date Received: _____

Award: _____

Eligible (Y/N): _____

Financial Need Rating (1-5)