

MICHAEL WOLF SCHOLARSHIP

APPLICATION CHECKLIST

- _____ Completed application form
- _____ Essay (see application form for description)
- _____ One personal reference
- _____ Two school-based references
- _____ High school transcript
- _____ Post-secondary transcript (if applicable)

Scholarship applications are due by May 1st.

Please submit all information requested to:

Michael Wolf Scholarship Committee
Ben Bronz Foundation
11 Wampanoag Drive
West Hartford, CT 06117

MICHAEL WOLF SCHOLARSHIP APPLICATION

Name		Today's Date	
Street Address			
Town		State	Zip Code
Date of Birth		High School	
Expected date of high school graduation		Post secondary education acceptances	
List extracurricular activities			
List honors/achievements earned while in high school			
<p>Write an essay (maximum 500 words) that addresses the following points and explains why you believe you are deserving of this scholarship:</p> <ul style="list-style-type: none">• Describe your understanding of your learning disability and your specific learning problems.• What are the strategies that work best for you and the modifications/accommodations that you require to be successful?• What do you consider to be your greatest achievement to date?• What goals have you set for yourself with regard to post-secondary education?			
<p>Please attach copies of high school or post-secondary transcripts and submit to the address below. The application deadline is May 1st.</p> <p style="text-align: center;">Michael Wolf Scholarship Committee Ben Bronz Foundation 11 Wampanoag Drive West Hartford, CT 06117</p>			

MICHAEL WOLF SCHOLARSHIP PERSONAL REFERENCE FORM

NAME OF APPLICANT		DATE
PERSON COMPLETING FORM	TITLE	
<p>Please comment on this student's ability to succeed in higher education and what you believe contributes to this ability.</p>		
<p>Is this person compassionate and able to foster empowerment in others?</p>		

All replies are confidential. Please return your completed reference form to:

Michael Wolf Scholarship Committee
Ben Bronz Foundation, 11 Wampanoag Drive, West Hartford, CT 06117

MICHAEL WOLF SCHOLARSHIP REFERENCE FORM

NAME OF APPLICANT		DATE
PERSON COMPLETING FORM	TITLE	
<p>Please comment on this student's ability to succeed in higher education, using the skills and strategies s/he acquired at Ben Bronz Academy.</p>		
<p>Is this person compassionate and able to foster empowerment in others?</p>		

All replies are confidential. Please return your completed reference form to:

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MICHAEL WOLF SCHOLARSHIP REFERENCE FORM

NAME OF APPLICANT		DATE
PERSON COMPLETING FORM	TITLE	
<p>Please comment on this student's ability to succeed in higher education, using the skills and strategies s/he acquired at Ben Bronz Academy.</p>		
<p>Is this person compassionate and able to foster empowerment in others?</p>		

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