

The Eugene Atwood Fund

Established September 22, 1916, by Mr. Eugene Atwood, late of Stonington, Connecticut, deceased to "aid deserving, industrious young people who are making an honest effort to accomplish the best results in life."

68 Federal Street
Post Office Box 270
New London, CT 06320
Telephone: 860- 443-4357
Email: atwood@mcguire-mcguire.com

TRUSTEES
Genevieve Atwood
James C. McGuire
Elizabeth Dodge White
Amanda Atwood Lindberg
Eleanor J. Saunders
Katherine A. Canner, D.D.S.
Laurel A. Butler

The Eugene Atwood Fund provides education loans to students who are residents of New London County. The loan is to be repaid, without interest, when the student has finished school. The amount granted to an individual varies each year depending upon the availability of funds. The average loan amount granted to students entering college in 2007 was \$2,400.00. If a loan is granted, it is paid in two installments, one half in September and the balance in January. You may apply each year as long as you are in college.

This application should be submitted to The Atwood Fund office with three letters of reference (not necessary if you are reapplying), a copy of your parents' most recent Federal Tax Return, and a copy of your most recent school transcript at least through the latest semester. A year-end transcript must be provided as soon as available. If your family's adjusted gross income is greater than \$50,000 you must submit a "Profile Financial Need Analysis Report" and a "SAR" report. This information is due before the end of April, for consideration by the Trustees at the annual meeting in June. **No applications will be accepted after May 1st.**

It is your obligation to make sure that all required documentation has been received by The Eugene Atwood Fund.

APPLICATION

APPLICATION DEADLINE MAY 1

Name _____ Birth Date _____

Present Home Address _____
Street and Number City or Town Zip

Home Telephone _____ Social Security Number _____

School (or College) _____

School (or College) Address _____

Name of Father / Stepfather _____

Name of Mother / Stepmother _____

Father / Stepfather's Occupation: _____

Employer: _____

Mother / Stepmother's Occupation: _____

Employer: _____

Marital Status of Parents: Married _____ Separated _____ Divorced _____ Widowed _____

Brothers and Sisters:	Name	Age	Present Educational Level
-----------------------	------	-----	---------------------------

EDUCATION OF APPLICANT

Elementary _____
Name of School

Secondary _____ Date of Graduation _____
Name of School Month Year

College (if any) _____ Attended: _____ to _____ Years completed _____
Name of School

Secondary School Record: You must request your high school to mail an official transcript of your record, including class standing, and a complete report of College Board Test Scores (Scholastic Aptitude Test and Achievement Tests).

College Record: If you are applying for subsequent college year, you must request your college to mail an official transcript of your record, including class standing.

Request Made _____ Date _____

Plan to attend _____
Name and Address of Institution

Admitted? Yes _____ No _____ Begins: Month _____ Year _____

College attending: _____
(if in college) Name and Address of Institution

_____ to _____
Date classes begin Grade level Years attended to date

Vocational Objective: I desire to become _____
State Profession or Occupation

Additional information, if any: Attach Additional Sheet

FINANCIAL STATEMENT

Estimated Funds Available and Expenses:

Applicant's savings:	_____	Room:	_____
Family contribution:	_____	Board:	_____
Applicant's earnings:		Tuition:	_____
Summer:	_____	Other fees:	_____
College:	_____	Books and supplies:	_____
Financial aid:		Transportation:	_____
Grants:	_____		
Loans:	_____		
Other: (please be specific)	_____		
Amount requested from Atwood Fund:	_____		
Total	_____	Total	_____

Totals should balance.

Present indebtedness of applicant and family:

Names of Creditors	Amounts owed
--------------------	--------------

Unusual Expenses: (illness, etc.) (Indicate nature and cost)

Income of Parents:

Father	_____
Mother	_____
Total	_____

Submit copy of parents' (or custodial parent's) most recent Federal Tax Return.

If you are a high school senior or first time applicant and your family's adjusted gross income is \$50,000 or more you must provide the current year "Profile Financial Need Analysis Report" from the College Scholarship Service of the College Board and the FAFSA Student Aid Report ("SAR"). The reports should be mailed directly to The Eugene Atwood Fund, 68 Federal Street, New London, CT 06320. Our College Board Code Number is 0594. Be sure to list the Fund as a recipient. You must also provide the SAR in each subsequent year that you apply to the Fund.

It is your obligation to make sure that all required documentation has been received by The Eugene Atwood Fund.

I refer the trustees to the following persons, other than my parents and guardian, as to my character, scholastic standing and need of financial assistance, and **enclose herewith their written statements** regarding the same.

1. _____ Phone _____

of _____
Street City State

2. _____ Phone _____

of _____
Street City State

3. _____ Phone _____

of _____
Street City State

I hereby promise to pay to the Trustees of The Eugene Atwood Fund on demand, whatever sum may be loaned to me on this application.

Dated at _____, this _____ day of _____

Signature of applicant

I hereby approve the above application and any loan the Trustees may make to the above applicant.

Signature of Parent or Guardian of Applicant