

Anne Kebler, CEO
Superintendent

SCHOOL ADMINISTRATIVE UNIT #101

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TO: Director of Guidance
FROM: Anne Kebler, Superintendent
SUBJECT: Carl Siemon Scholarship Fund
DATE: November 1, 2024

The Carl Siemon Scholarship Fund has been established by Carl Siemon and Family of Milton and Wakefield, NH. The fund is administered by two separate endowment funds for scholarship purposes in the towns of Milton and Wakefield. The increment and income of the funds will be used annually to grant or renew scholarships to graduates of public or private schools who are residents of the Town of Wakefield.

The Trustees of Trust Funds in the Town of Wakefield have been entrusted to manage the endowment. The increment and income of the funds will be used annually to grant and renew scholarships to graduates of public or private schools who are residents of the Town of Wakefield. These students must have demonstrated superior academic achievement and qualities of leadership, be active in extracurricular activities (particularly those of a community nature) and show financial need to pursue their education.

Completed applications must be returned by April 11, 2025 in care of: Superintendent of Schools, School Administrative Unit #101, 76 Taylor Way, Sanbornville, NH 03872

A copy of the application form is enclosed with this correspondence and may be reproduced as needed.

CARL SIEMON SCHOLARSHIP APPLICATION – For School Year 2025-2026

1. Name of Applicant: _____

2. Mailing Address: _____

3. Date of Birth: _____

4. Name of Parents or Guardians: _____

(note if deceased)

(note if deceased)

5. Applicant's email address: _____

6. Number of brothers or sisters dependent on parents for main support: _____

7. List of schools to which you have applied: Approximate cost of each:

_____ Cost: _____

_____ Cost: _____

_____ Cost: _____

8. Which school is your first preference?

9. By which school have you been accepted?

10. Vocational preference after graduation from college:

11. Have you applied for other scholarship aid? _____

Results, if known: _____

12. Approximate income of family after paying income taxes: _____

13. How much financial help for your education can your family assume? _____

14. How much do you expect to contribute toward your education? _____

15. How much financial help do you need, excluding all personal and family help to attend the college of your choice? _____

16. If you have any brothers or sisters who will be attending a school at the same time as you, list them with the amount of money your parents are contributing towards their education:

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16. Please write, as briefly as possible, an autobiographical sketch of yourself, describing past accomplishments, current activities, interests, hobbies and future vocational plans. Also, please indicate how you will contribute to your community in the future

AUTOBIOGRAPHY
(Please continue another page if necessary)

Please include with this application copies of recommendations and school transcripts.
Submit application to: Superintendent of Schools, School Administrative Unit #101, 76
Taylor Way, Sanbornville, NH 03872

APPLICATION DEADLINE: APRIL 10, 2024