

**The Phillip A. Wood Memorial Scholarship - General information**

**The Phillip A. Wood Memorial Scholarship is awarded to a qualified applicant who will seek a degree in one of the following fields: Forestry, Botany, Horticulture, Soil Service, Plant Biology, Conservation, Watershed Management, Wildlife Management, Wildlife Biology, Animal and Veterinary Services, Wildlife Ecology, Park and Recreation Management, Fire Suppression and Fire Prevention.**

**Enclosed is an application of the Phillip A. Wood Memorial Scholarship and three (3) personal reference forms. (additional copies may be made)**

**The application should be returned, with three personal references, a transcript of High School grades. A copy of the acceptance notice from the college or institute the applicant will be attending, and any other further information deemed significant.**

**All documents should be received by the Scholarship Committee not later than May 10, 2019.**

**Please forward applications and personal references forms and all other forms and information to:**

**Phillip A. Wood Memorial Scholarship  
Attn: John J. McGuire Jr.  
97 Beverly Street  
North Andover, Ma. 01845**

**Sponsored by  
Essex County Fire Wardens Association**

**3/30/19**

The Phillip A. Wood Memorial Scholarship  
Essex County Fire Warden's Association

APPLICATION

Name in full \_\_\_\_\_

Home Address \_\_\_\_\_

High School from which graduated (or will graduate) \_\_\_\_\_

Honors received while attending High School \_\_\_\_\_

High School or other extracurricular activities \_\_\_\_\_

College or Institute that you will attend \_\_\_\_\_

Address \_\_\_\_\_

Course of Study \_\_\_\_\_

Degree to be received \_\_\_\_\_

A concise statement of life's purpose and ambition - (use other side of sheet if needed)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent's or Guardian's Name \_\_\_\_\_

Number of brothers and sisters attending school \_\_\_\_\_

I declare, that in the best of my knowledge and belief, the information and answers given above are complete and correct.

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

This application should be accompanied by a transcript of your High School grades and a copy of the acceptance notice from the college or institute that you will attend. Three REFERENCES (one from your Principal or Guidance Counselor) should be sent directly. All documents should be sent to:

Phillip A. Wood Memorial Scholarship Committee  
Attn: John J. McGuire Jr.  
97 Beverly Street  
North Andover, Ma 01845

The Phillip A. Wood Memorial Scholarship  
Essex County Fire Warden's Association

REFERENCE FORM

To be completed by Guidance Department/Parent/Guardian

\_\_\_\_\_ has applied to the Phillip A. Wood Memorial  
Scholarship Committee for a scholarship to begin \_\_\_\_\_.

I am aware of this request for a personal reference, and do approve the application for a  
scholarship

\_\_\_\_\_  
Guidance Department/Parent or Guardian

\*\*\*\*\*

To be completed by a Person (not a relative) who has been a business, professional, or a social  
acquaintance of the applicant for at least three years.

**The information that you give will be treated in the strictest of confidence. We will  
appreciate thoughtful and candid answers**

\*\*\*\*\*

What is the basis of your acquaintance with the applicant? \_\_\_\_\_

\_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_

Does the applicant work well with others? \_\_\_\_\_

What degree of success do you predict for the applicant? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you any reason for lack of confidence in the applicant? \_\_\_\_\_

Additional remarks or thoughts (Use the reverse side of form in necessary) \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

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Signature \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

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Does the applicant work well with others? \_\_\_\_\_

What degree of success do you predict for the applicant? \_\_\_\_\_

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Additional remarks or thoughts (Use the reverse side of form in necessary) \_\_\_\_\_

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(3/30/19)