

The Shawn J McDuff Scholarship

2026 Scholarship Application

(Sponsored by the Shawn J. McDuff Scholarship Fund)

Applicant Information:

Name: _____ Date of Birth: _____

Address: _____ Telephone: _____

City: _____ Zip Code: _____

High School Attended: _____

Year of Graduation: _____

Applicant's
Signature: _____ Date: _____

All information will be kept confidential.

The Shawn J. McDuff Scholarship

2025 Scholarship Application

A. Applicant Information:

Year of
Graduation

1. High School attended: _____

2. Universities/Colleges/Schools applied to:

<u>Name of University/College/School</u>	<u>School's Location</u>	<u>Accepted (Yes/No)</u>	<u>Attending (Yes/No)</u>
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. _____	_____	_____	_____
d. _____	_____	_____	_____

3. Projected College Major: _____

4. High School Activities and Volunteer Work

5. High School Honors, Prizes, Awards, etc.

6. Work experience.

7. Special skills, hobbies, interests, etc.

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B. Applicant's Essay (required):

We would like to become as familiar with each applicant as we possibly can. In many situations, hearing or reading one's own words can tell considerably more about a person, their values, their integrity, and their character. Application forms do not always provide all the information. On separate page (one-side), we ask that you briefly share with us, your goals, future plans and how this scholarship will help you overcome a disability achieve them. Feel free to also include any other information that you think is appropriate for us to consider. Please take this opportunity to tell us about yourself.

All information will be kept confidential.