

**THE CHARLES M. HARRINGTON AND  
JULIA C. HARRINGTON SCHOLARSHIP FUND**

1. This scholarship fund was made possible through the generosity of the late Judge Harrington and his wife and is known and designated as THE CHARLES M. HARRINGTON AND JULIA C. HARRINGTON SCHOLARSHIP FUND.
2. Awards are granted to worthy and needy students who meet the following requirements:
  - a. Applicants must be current or past graduates of Plattsburgh High School, Plattsburgh, N.Y.
  - b. Applicants must have completed at least 3 years of their high school work at Plattsburgh High School.
  - c. In studying for an undergraduate degree, applicants must be attending or about to attend one of the following colleges or universities:

Cornell University  
Ithaca, New York

Dartmouth College  
Hanover, New Hampshire

Williams College  
Williamstown, Massachusetts

Colgate University  
Hamilton, New York

Hamilton College  
Clinton, New York

St. Lawrence University  
Canton, New York

Clarkson College of Technology  
Potsdam, New York

University of Vermont  
Burlington, Vermont

3. Once a student has been selected for this scholarship, he or she shall be eligible to continue receiving the award during the remainder of the first 4 years of college, provided that his or her conduct and scholastic standing merit its continuation in the judgment of the Scholarship Committee and that he or she continues to be worthy and needy.
4. This scholarship award is available only for undergraduate work and cannot apply to graduate work or to work leading to an advanced degree.

## STUDENTS APPLICATION

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_

I attended Plattsburgh High School continuously from \_\_\_\_\_ to date.  
I expect to attend \_\_\_\_\_ Accepted? \_\_\_\_\_  
(Name of College)

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

Please furnish information with respect to financial assistance you anticipate from any of the following sources:

Scholarship Incentive Award	_____	\$	_____
Regents Scholarship	_____	\$	_____
Scholarship Given by College or University	_____	\$	_____
Gifts or Grants from Relatives	_____	\$	_____
Part-time Employment	_____	\$	_____
Other(explain)	_____	\$	_____

Estimated total annual cost at the college I expect to attend:

Tuition	\$ _____	Books	\$ _____
Room & Board	\$ _____	Incidentals	\$ _____
Fees, etc.	\$ _____	TOTAL	\$ _____

Briefly list your school activities for the last two years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly list your hobbies, interests and employment for the last two years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PLEASE READ THE FOLLOWING AUTHORIZATION:

In the event I am granted assistance, I hereby agree and authorize the Dean or the Students' Office of the college I attend to furnish the Charles H. Harrington and Julia C. Harrington Scholarship Fund Committee with a report of my activities both scholastic and social for each semester during my attendance.

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

CHARLES M. HARRINGTON AND JULIA C. HARRINGTON  
SCHOLARSHIP FUND

FINANCIAL STATEMENT OF PARENT OR GUARDIAN

Name of Applicant \_\_\_\_\_

Name of Father or Guardian \_\_\_\_\_

Occupation \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Salary for the last calendar year \$ \_\_\_\_\_

Name of Mother \_\_\_\_\_

Occupation \_\_\_\_\_

Name and Address of Employer \_\_\_\_\_

Salary for the last calendar year \$ \_\_\_\_\_

Annual income of both parents from OTHER sources \$ \_\_\_\_\_

Total income of both parents \$ \_\_\_\_\_

Total amount of any financial obligations you may have, such  
as mortgages, loans, etc. \$ \_\_\_\_\_

Total amount of any extraordinary expense, such as unusual  
medical costs or expenses of other children in college \$ \_\_\_\_\_

List other dependents in addition to applicant:

<u>Name</u>	<u>Age</u>	<u>Occupation, School or College</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby certify that the above information is  
a true and accurate statement.

Date \_\_\_\_\_  
Parent or guardian \_\_\_\_\_

## REPORT OF PRINCIPAL OR STUDENT GUIDANCE DIRECTOR

Total number of members in graduating class \_\_\_\_\_

Applicant's standing in above class \_\_\_\_\_

Please circle the number on the following ten-point scale which, in your opinion, best rates the applicant with respect to his promise as a student, his promise as a person (i.e., his promise of sound influence and leadership outside the classroom), and his need for financial assistance.

	<u>Oustanding</u>		<u>Above Average</u>		<u>Average</u>		<u>Below Average</u>			
Promise as a student	10	9	8	7	6	5	4	3	2	1
Promise as a person	10	9	8	7	6	5	4	3	2	1
Need of financial Assistance	10	9	8	7	6	5	4	3	2	1

Please give your estimate of the character, intellectual promise and industry of the applicant.

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_