



# NEW HAMPSHIRE ASSOCIATION OF FIRE CHIEFS

*"Working Together to Make a Difference"*

NHAFC 547 Charles Bancroft Highway Litchfield, NH 03052

[nhfirechiefs@gmail.com](mailto:nhfirechiefs@gmail.com)

## The New Hampshire Association of Fire Chiefs Educational Scholarship Program Promoting Excellence in Fire Protection, Safety and EMS through Post-Secondary Education

**Award: Up to four (4) \$500 scholarships will be awarded to applicants for the 2024-2025 school year. Application Deadline: July 1, 2024**

### Eligibility Requirements

- Currently a graduating high school senior or a post-secondary student - High school or post-secondary grade point average of 2.5 or above
- Citizen or permanent resident of the United States
- **Category 1**
  - Pending acceptance to either:
    - New Hampshire Technical Institute and be enrolled in the Paramedic Emergency Medicine Program or
    - Lakes Region Community College and be enrolled in the Fire Protection or Fire Science Associates Degree Program
  - Shall be a member of Fire Department whose Chief Officer is a member of the New Hampshire Association of Fire Chiefs
- **Category 2**
  - Shall be a Legal dependent of a member of the New Hampshire Association of Fire Chiefs
- **ALL APPLICANTS**
- Agreement to attend a NHAFC meeting to accept your award
- Scholars should be willing to update the NHAFC about their experience by April 2025
- Scholars must use the funds awarded within one calendar year from the official award date

NOTE: Applicants can reapply annually.

**Scholarship Award Application:** Applicants **must** submit the following information for scholarship consideration:

- Completed application form (see page two)
- Essay describing how
  - **(Category 1)** a degree in Fire Technology, Fire Science or Paramedicine will impact you, your Department and your community?
  - **(Category 2)** you will use your degree to help others?
- High school and/or any post-secondary school transcripts (most recent)
- Letter of recommendation from an academic advisor, academic counselor or recent instructor
- Letter of recommendation from an individual not related to you

Please submit all of the above items in a single envelope postmarked by July 1, 2024 to:

**The New Hampshire Association of Fire Chiefs  
547 Charles Bancroft Highway  
Litchfield, N.H. 03052**



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## **The New Hampshire Association of Fire Chiefs Educational Scholarship Program Application**

1. Please print clearly the following information. Turn in completed application, with all applicable signatures.
2. If this form is incomplete, inaccurate, or not signed, it will not be considered.
3. Please attach Essay and Letters of Recommendation (see specific scholarship criteria).

### **Personal Information:**

Applicant Name:

Home Address:

City: State: Zip

Home Phone: Cell Phone:

SSN#: E-mail

Category Applying for Category 1  Category 2

Fire Department Affiliation: Affiliated NHAFC Member Name

Relationship with Fire Department and/or NHAFC Member:

### **Academic Information:**

College: Intended Major: Credit Hours Earned to Date

I release (College)

The right to access all my current and ongoing personal and academic records and transcripts. If awarded a scholarship, I understand that I must meet the scholarship criteria for the New Hampshire Association of Fire Chiefs Scholarship Committee (**Initial:**\_\_\_\_\_)

I understand my name and information from my academic history may be released to the New Hampshire Association of Fire Chiefs Scholarship Committee. If awarded a scholarship, I release to the New Hampshire Association of Fire Chiefs Scholarship Committee., the right to arrange a meeting with the donor(s) and use my name, story, and picture for printed and video materials, reports, and press releases, without compensation, as well as I will attend ceremonies and receptions. I also recognize the advisability of communicating a letter of thanks to the donor of the scholarship (**Initial :**\_\_\_\_\_)

### **Authorization Information**

I certify that the statements herein are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the scholarship selection committee(s) and scholarship donor(s).

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_