

# New England Fraternal Alliance "Family of the Year" Award

-NOMINATION FORM-

General Instructions: Type or print all information. Additional paper may be used if space allocations are not sufficient. Photographs, news clippings, letter of commendation or other special reports or attachments may be included.

Mail completed applications to: Joseph Goda, Chair, Family Life Committee, 85 Valley View Road, Stratford, CT 06614

ENTRY DEADLINE: September 1, 2018

I. PERSONAL DATA:	
Member's Name:	
Spouse's Name:	-
Home Address:	
Home Telephone:	Business Telephone:
Children's Names:	Age:
	Age:
	Age:
II. FRATERNAL ORGANIZATION I	NFORMATION:
Nominee's Society:	·
Local Lodge Name and Number:	
Location:	
For how many years has Nominee been	a member of this Society?
List Nominee's most significant achieve appointed positions.)	ments in their Society. (Awards, Committee work, elected or

#### **III. OTHER ORGANIZATIONS**

To what other church or community organizations does the Nominee belong?

List the Nominee's achievements within these organizations:

IV. DESCRIBE WHY YOU HAVE NOMINATED THIS INDIVIDUAL TO RECEIVE THIS AWARD. (Use additional sheet if necessary)

Mail completed application to: Joseph Goda New England Fraternal Alliance 85 Valley View Road Stratford, CT 06614

Telephone: \_

4

## SCHOLARSHIP PROGRAM 2018 NEW ENGLAND FRATERNAL ALLIANCE



#### **GUIDELINES AND PROCEDURES**

- Award: Two \$1,000.00 scholarships will be awarded by the New England Fraternal Alliance to students in their sophomore, junior, or senior year in college or in graduate school. The first is named in memory of Pearl Plante, a loyal and tireless worker for the New England Fraternal Alliance.
- **Eligibility:** Applicant must be enrolled as a full-time student in an accredited college/university or graduate school.

Applicant must be a resident of New England and a member (or a son /daughter of a member) of a fraternal benefit society that holds a membership in the New England Fraternal Alliance.

Applicant must have a cumulative grade average of at least 2.0 (on a 4.0 system). Transcript of grades from spring 2018, semester must be submitted with application.

Application for scholarship award must be completed in its entirety and submitted by September 1, 2018. Incomplete and/or late entries will be disqualified.

Procedures: The \$1,000.00 scholarship awards will be paid directly to Recipients.

The deadline for submission of applications for the Scholarship awards will be September 1, 2018.

Criteria to be used in judging: overall merits of applicant, Cumulative grade average, college activities/honors, community activities, financial need and essay content.

From among the entries, top ten applications will be selected and referred to a threemember panel for final judging.

Recipients of NEFA scholarship awards will be notified by October 15, 2018.

Entries for consideration must be forwarded by September 1, 2018 to: Albert Costa, Chair - Scholarship Committee, 1735 Beacon Street, Waban, MA 02468.

### "APPLICATION FOR SCHOLARSHIP AWARD "

#### NEW ENGLAND FRATERNAL ALLIANCE

### (Please type or print all information) ENTRY DEADLINE: SEPTEMBER 1 2018

Applicant's Name:			·
Home address: State:		Zip:	· · · · · · · · · · · · · · · · · · ·
Date of Birth:			
Telephone: ( )	,		
Do your parents claim you as a dependent?		_Yes	No
If yes, annual family income: \$	If no, your annu	al income: \$	
How many children in your family? Ages?			
ORGANIZATIONAL DATA To which fraternal benefit society do you belong mother/father belong?)	? (If you are not a m	nember, to which	fraternal benefit society do
Society Name:	·/····································		
Lodge/council/branch/court number:			
Loostian			
Location:	Self		
Number of years as a member: COLLEGE DATA College/University where you are currently enrol	Self	Mother	Father
Number of years as a member:	Self	Mother	Father
Number of years as a member: COLLEGE DATA College/University where you are currently enrol Name of School:	Self	Mother	Father
Number of years as a member:	Self led: Junior	Mother	Father
Number of years as a member: <u>COLLEGE DATA</u> College/University where you are currently enrol   Name of School:   Location:   Year in School:	Self led: Junior Yea	Mother Senior	Father
Number of years as a member: <u>COLLEGE DATA</u> College/University where you are currently enrol   Name of School:   Location:   Year in School:   Sophomore   Expected date of graduation:	Self led: Junior Yea nor:Yea	Mother Senior r:	Father
Number of years as a member: <u>COLLEGE DATA</u> College/University where you are currently enrol   Name of School:   Location:   Year in School:   Sophomore   Expected date of graduation:   Major:	Self led: Junior Yea nor:	Mother Senior	FatherPost -Graduate(on a 4.0 scale)

Tuition, Room and Board

Scholarships Awarded (Donor/Amount)
Community Activities:
SCHOLARSHIP AWARD ESSAY
Explain why the scholarship award from the New England Fraternal Alliance should be presented to you.
The information provides in this application is true and complete.
Signature of applicant:
Date:
NOTE: Letter of recommendation from school official or employer may be included with application.
Mail completed application by September 1, 2018 to:
NEFA SCHOLARSHIP AWARDS Albert Costa, Chair - Scholarship Committee 1735 Beacon Street, Waban, MA 02468



NEW ENGLAND FRATERNAL ALLIANCE

# "Family of the Year" Award

# GUIDELINES AND PROCEDURES

"The Family of the Year" Award is presented annually by the New England Fraternal Alliance to a family in recognition of their dedication to fraternalism and for outstanding volunteer service or contributions.

Eligibility requirements for the award are as follows:

- 1. Nominee must be a resident of New England and a member of a fraternal benefit society that holds membership in the New England Fraternal Alliance.
- 2. To be named winner of the award, nominee must be living at the time of the selection.
- 3. Nominee can be either a volunteer or home office personnel. Current NEFA Executive Officers are not eligible for nomination.

## Program Procedures:

- 1. The award is administrated by the NEFA Family Life Committee, as appointed by the current NEFA President
- Any member of a Society belonging to the New England Fraternal Alliance is eligible to nominate a family for the NEFA "Family of the Year Award and submit the required nomination form for judging by the NEFA Family Life Committee. Deadline for submission of nomination is September 1, 2018. There will be absolutely no extension of this deadline.
- 3. The NEFA Family Life Committee will select the top three nominees for the NEFA "Family of the Year Award" and refer the nominations of these three finalists to the Executive Officers of the NEFA. The winner will be determined by a majority vote of the Executive Officers of the New England Fraternal Alliance.
- 4. An engraved plaque will be presented to the NEFA "Family of the Year" at the Annual Meeting of the NEFA. All nominees will receive a certificate of recognition from the NEFA.
- 5. The NEFA Publicity Committee will disseminate publicity relating to the award recipients.

Entries for consideration must be forwarded by September 1, 2018 to: Joseph Goda, Chair, Family Life Committee, 85 Valley View Road, Stratford, CT 06614



NEW ENGLAND FRATERNAL ALLIANCE

# Harvey G. Bacque "Fraternalist of the Year" Award

# **GUIDELINES AND PROCEDURES**

"The Fraternalist of the Year" Award is presented annually by the New England Fraternal Alliance to a member in recognition of their dedication to fraternalism and for outstanding volunteer service or contributions.

## Eligibility requirements for the award are as follows:

- 4. Nominee must be a resident of New England and a member of a fraternal benefit society that holds membership in the New England Fraternal Alliance.
- 5. To be named winner of the award, nominee must be living at the time of the selection.
- 6. Nominee can be either a volunteer or home office personnel. Only the current four NEFA Executive Officers are not eligible for nomination.

## Program Procedures:

- 6. The award is administrated by the NEFA Fraternalist of the Year Committee, as appointed by the current NEFA President
- 7. Any member of a Society belonging to the New England Fraternal Alliance is eligible to nominate a member for the NEFA "Fraternalist of the Year Award and submit the required nomination form for judging by the NEFA Fraternalist of the Year Committee. **Deadline for submission of nomination is September 1, 2018**. There will be absolutely no extension of this deadline.
- 8. The NEFA Fraternalist of the Year Committee will select the top three nominees for the NEFA "Fraternalist of the Year Award" and refer the nominations of these three finalists to the Executive Officers of the NEFA. The winner will be determined by a majority vote of the Executive Officers of the New England Fraternal Alliance.
- 9. An engraved plaque will be presented to the NEFA "Fraternalist of the Year" at the Annual Meeting of the NEFA. All nominees will receive a certificate of recognition from the NEFA.
- 10. The NEFA Publicity Committee will disseminate publicity relating to the award recipients.

Entries for consideration must be submitted before September 1, 2018 to: Marion Varga, New England Fraternal Alliance, 699 Wormwood Hill Road, Storrs-Mansfield, CT 06268



# New England Fraternal Alliance Harvey G. Bacque "Fraternalist of the Year" Award

-NOMINATION FORM-

General Instructions: Type or print all information. Additional paper may be used if space allocations are not sufficient. Photographs, news clippings, letter of commendation or other special reports or attachments may be included.

Completed entries should be submitted to: Marion Varga, New England Fraternal Alliance, 699 Wormwood Hill Road, Storrs-Mansfield, CT 06268

ENTRY DEADLINE: September 1, 2018

I. <u>PERSONAL DATA:</u>
Member's Name:
Spouse's Name:
Home Address:
Home Telephone: Business Telephone:
II. FRATERNAL ORGANIZATION INFORMATION:
Nominee's Society:
Local Lodge Name and Number:
Location:
For how many years has Nominee been a member of this Society?
List Nominee's most significant achievements in their Society. (Awards, Committee work, elected or appointed positions.)

### **III. OTHER ORGANIZATIONS**

To what other church or community organizations does the Nominee belong?

List the Nominee's achievements within these organizations:

-

IV. DESCRIBE WHY YOU HAVE NOMINATED THIS INDIVIDUAL TO RECEIVE THIS AWARD. (Use additional sheet if necessary)

Mail completed application by September 1, 2018, to:
Marion Varga New England Fraternal Alliance 699 Wormwood Hill Road Storrs-Mansfield CT 06268