

Historic Deerfield Undergraduate 2025 Summer Fellowship Program in Early American
History and Material Culture

Financial Aid Award Authorization Form

Instructions: If you wish to be considered for a stipend to offset lost summer income, please complete Section A and then bring this form to the financial aid office at your present college (you may have to leave it with them). After they have completed and signed the form, either scan and email it to sfp@historic-deerfield.org by February 3, 2025 or mail it (postmarked by February 3, 2025) to Erika Gasser, Director, Summer Fellowship Program, Historic Deerfield, Inc., P.O. Box 321, Deerfield, MA 01342.

Section A: To be completed by the student:

I authorize the Financial Aid Office at _____
to provide Historic Deerfield, Inc. with the information requested.

Student name (please print) _____

Student signature _____

Student ID# _____ Date _____

Section B: To be completed by the Financial Aid Office:

The Summer Fellowship Program allows college undergraduate students to study early American history and experience the workings of a museum of New England history and art. This applicant, if successful, will be awarded a non-monetary fellowship valued at approx. \$8,500 which covers tuition, books, field trip expenses, and room and board for nine weeks. A limited number of awards to offset lost summer income – ranging from \$1000 to \$1500 – will be awarded to students with demonstrated financial need. This applicant is applying for one of these awards.

For the most recent academic year, did the student apply for need-based aid?

yes no

If yes, please provide the following:

The total student budget figure used \$ _____

Calculated family contribution \$ _____

Total aid award \$ _____

Does your college require summer employment as part of this student's aid package?

yes no

If yes, how much money is the student required to earn? \$ _____

If yes, would the college be willing to waive or reduce this requirement to enable the student to attend the Summer Fellowship Program?

yes no

Person completing form (please print name & title)

Person completing form signature

Email address

Name of college/university

Date