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**TRAVIS ALBERT – CIRCLE OF FRIENDS  
2026 SCHOLARSHIP APPLICATION  
(current Graduating Class)**

*Please fill in the following information:*

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Current School Attending: \_\_\_\_\_

Colleges Applied To/Plan to Attend:

Name: _____	Location: _____	Cost: _____
Name: _____	Location: _____	Cost: _____
Name: _____	Location: _____	Cost: _____
Name: _____	Location: _____	Cost: _____
Name: _____	Location: _____	Cost: _____

Expected Graduation Date: \_\_\_\_\_

Estimated Family Contribution: \_\_\_\_\_

Class Rank: \_\_\_\_\_

**Please attach the following to this application, and send to below e-mail in ONE PDF file:**

- 1. Please provide a list of all extracurricular activities, volunteer work, and/or employment history using the below form.**
- 2. Please provide a BRIEF description of your plans for the future/dream career. 2 sentences MAX**
- 3. Please provide your College Essay.**
- 4. High School Transcripts**
- 5. Must have High School GPA of 2.5 or higher to be eligible.**

**\*\*If your application is incomplete when received, you will be automatically disqualified.**

Scholarship will be issued directly to student **after** committee receives first college semester “official” transcript and proof of attendance for second semester (i.e., spring schedule) with at least 2.5 GPA. Of note, if requested documents are not received within **six months of completion of student’s first semester**, student’s scholarship will be forfeited.

Completed form to be submitted via E-mail to:

**[TravisAlbertCOF@gmail.com](mailto:TravisAlbertCOF@gmail.com)**

**SUBMISSION DEADLINE: FRIDAY MARCH 13<sup>th</sup>, 2026**

If you have any questions, please feel free to contact

**Brianna Albert @ (774) 930-3996 or the e-mail above**

*You will receive an e-mail confirmation around time of deadline if your application has been received.*

**Please list your activities in sequential order starting with the most recent.**

[illegible]

Organization	Description of Volunteer Service	Hours	Length Service

Employer	Position - Job Description	Hours Per Week	Length Employment (mm/dd/yy-mm/dd/yy)



**Future/Dream Career**

**Anticipated College Major:** \_\_\_\_\_

**Dream Job/Career:** \_\_\_\_\_

**Tell us why this is your dream job/career. MAXIMUM 2 sentences.**

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**College Essay:**

**Transcript:**