



ALLAN Z. GILBERT SCHOLARSHIP FUND
New England Refreshment Services Association

180 Kerry Place - Suite B
Norwood MA 02062
Voice (617) 548-1012

March 1, 2026

Dear Friends:

It's time to start the scholarship awards process for the 2026-27 academic year.

As a member of the New England Refreshment Services Association, your employees (and members of their immediate families) are eligible to apply for scholarship aid. I have included a PDF file of the Scholarship Application for their use, and a poster that you may use to publicize the program. Please feel free to print, email, or otherwise distribute as many copies as you need.

As in the past, scholarship applications must be returned to this office no later than May 31, 2026. They may be returned via US mail, or scanned & emailed in pdf format. **We cannot accept “pictures” or JPG type file formats.** The eligibility of each applicant must be verified by an officer of the sponsoring company and the sponsoring company must be a member in good standing of the New England Refreshment Services Association. The applicant must be an employee, or a member of the immediate family of a current employee. Please take the time to follow through with this requirement. **We cannot accept an application without the employer’s signature. Also, please remind the applicants to include their latest, academic grade reports with their application.**

Since its inception, the Scholarship Fund has awarded more than \$1,118,850 in scholarship aid to the families of employees of our member companies. This program is totally funded by voluntary contributions from the member companies. Your generous support in the form of annual gifts, dues contributions, and participation at the NERSA annual meeting, all help to make this program work.

Thank you for your continuing support.

Sincerely,

ALLAN Z. GILBERT MEMORIAL SCHOLARSHIP FUND

Steve Foley

Stephen Foley
Chairman
Stevef617@outlook.com

Ed Dooley, Trustee
Charles Brinkmann, Trustee
Tina Paine, Trustee

The Allan Z. Gilbert Memorial Scholarship Fund Application

Allan Z. Gilbert Scholarships are available to the children of employees of companies that are active members of the New England Refreshment Services Association



Please PRINT or TYPE all entries. Attach additional sheets if more space is needed. Applicants are encouraged to submit answers to questions on the last page as a Word Document (or similar). Completed applications must be received before May 31. Deliver via US mail, fax or pdf (emailed pdfs are preferred). **Picture formats (jpeg, etc.) for the application or grade report will not be accepted.** Send to:

The Allan Z. Gilbert Memorial Scholarship Fund
c/o Canteen Norwood
180A Kerry Place
Norwood MA 02062
Voice – 617-548-1012 Email – stevef617@outlook.com

Applicant Information		Date
Last Name	First	Middle initial
Home Address	City State	Zip
Email Address	Date of Birth	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married # of Dependents

- Applicants must plan to be a full-time student at an accredited institution of undergraduate higher education. This scholarship is not available for graduate programs.
- A panel of educators independent of the vending industry or the Massachusetts Vending Association will score each application using consistent scoring metrics. Please be aware that any sections left blank or incomplete may be scored at zero points for that section.
- This application will not be eligible unless it includes the applicant's most recent **academic grade report** AND is **signed by a representative** of the NERSA member company.

For Allan Z. Gilbert Scholarship Fund Committee Use Only:	
Date Received	<input type="checkbox"/> Signed by Applicant <input type="checkbox"/> Signed by Parent <input type="checkbox"/> N/R <input type="checkbox"/> Grades included <input type="checkbox"/> Signed by NERSA Member <input type="checkbox"/> NERSA Member Co in good standing

❖ Employment ❖

List employers for the last 5 years beginning with your present or most recent employer.

Employer	Position/Duties	Salary	hours / month	# months	total hours per year

❖ Education ❖

I presently attend: High School Junior or Community College Senior College Vocational School

Name of School _____

City State Zip _____

Next fall term I will be attending: Junior or Community College Senior College Vocational School

I will be a: Freshman Sophomore Junior Senior *not available for graduate programs

My college will be: _____

College website _____

City State Zip _____

High School Attended

Name of School _____

Date Graduated _____

Grade Point Average _____

College Attended

Name of School _____

Degree Major _____

Years Attended _____

Grade Point Average _____

List any academic honors you have achieved:

date or period

description of academic honor

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•

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IMPORTANT – Please note that this application will not be eligible unless it includes the applicant's most recent academic grade report AND is signed by an officer of the NERSA member company.

❖ Activities ❖

List your past or current community or extracurricular activities:

<u>date or period</u>	<u>activity</u>	<u>hrs / month</u>	<u># months</u>	<u>total hours per year</u>
•				
•				
•				
•				

List any offices or leadership positions you have held:

<u>date or period</u>	<u>description</u>
•	
•	
•	
•	
•	

❖ Educational Program ❖

Describe the educational program for which you are seeking this scholarship, including the name of the institution or organization sponsoring the program, the subject matter or area of study, how long it will take to complete, the cost of the program and whether any degree will be awarded upon completion. Please attach any printed material describing the program or the sponsoring institution or organization.

Explain your reasons for applying for this scholarship and why you believe it should be awarded to you.

What are your career goals for the first five years after earning your degree?

¤ Student's Income & Expenses for One School Year ¤

State only amounts of which you are certain or can reasonably estimate. Do not include financial aid for which you are applying:

Income

1 From scholarships, fellowships or tuition waivers \$ _____

2 From your savings or investments \$ _____

3 Earnings during school year \$ _____

4 Earnings during summer \$ _____

5 Earnings of spouse \$ _____

6 Financial aid from parents \$ _____

7 Loans (banks, school, government) \$ _____

8 Other _____ \$ _____

Expenses

1 Tuition: Private \$ _____
In-State \$ _____
Out-of-State \$ _____

2 Fees, books, supplies \$ _____

3 Room & board at school \$ _____

4 Rent, food, utilities off campus \$ _____

5 Clothing, laundry, cleaning \$ _____

6 Other _____ \$ _____

7 Other _____ \$ _____

TOTAL: \$ _____

TOTAL: \$ _____

State whether you are eligible for reimbursement from any other source for any of the expenses to be incurred in participating in this educational program and if so, the amount eligible for reimbursement.

State the amount of scholarship funds you are seeking and provide an estimated breakdown of how these funds will be spent.

¤ Required Signatures ¤

If you are claimed by your parents/guardians as a tax deduction, they must complete and sign the section below.

Number of dependent children attending college, including applicant? _____

Parents/Guardian's income:

Under \$75,000 \$75,000 - \$100,000 \$100,000 - \$125,000 over \$125,000

(Print) Parent or
Guardian Name _____

Email
address _____

Parent or Guardian
Signature _____

Not required - Applicant not claimed as
deduction on parent/guardian's tax return

I agree to furnish the Scholarship Fund committee with proof of course completion and grades. In making this application for an Allan Z. Gilbert Scholarship I certify that, to the best of my knowledge, the information in this application is complete and accurate.

Signature of
Applicant: _____

Date _____

I am aware that this applicant is applying for an Allan Z. Gilbert Memorial Scholarship and verify the eligibility.

The parent of this applicant is a current, legal employee of the NERSA member company designated below.

NERSA Member
Company Name _____

Signature of verifying NERSA member
company officer, manager or representative _____

◀ Required for
eligibility

Verifying name printed _____

Date _____

Email Address _____

Do your children need money to attend college?

Apply for an Allan Z. Gilbert Scholarship!

**It could be
your children's**



**the key to
future!**

**The Allan Z. Gilbert Memorial
Scholarship
Fund**



- The Allan Z. Gilbert Memorial Scholarship Fund offers scholarships for under-graduate study to the families of employees of New England Refreshment Services Association member companies.
- The scholarships are awarded annually on the basis of academic merit and need.
- Ask your employer for details and an application form.
- **Act Now!** Applications must be in by May 31st!

PLEASE POST

