The Woman's Club of Brielle Brielle, New Jersey

APPLICATION FOR SCHOLARSHIP DIRECTIONS

Our scholarships are available to the following: senior high school students going on to higher education; senior high school vocational school students who wish to further their training; and women who wish to seek education to enter or reenter the workplace.

- 1. The application package must mailed and postmarked by April 1,2024. Please include:
 - A. The completed application. Download it from our website (thewomansclubofbrielle.org), or ask your counselor for a copy.
 - B. A copy of the application essay.
 - C. An official school transcript/record with raised school seal
- 2. The student must plan to attend an accredited college, university, business, vocational technical school or trade program.
- 3. The applicant is required to complete all parts of the application to be considered for the scholarship.
- Take the completed application and essay to your guidance counselor.

 The counselor or representative will mail the signed application, essay, and official transcript to:

The Woman's Club of Brielle Scholarship Committee P.O. Box 502 Brielle, New Jersey 08730

Save this address for future communication.

The decision of the Woman's Club of Brielle will be based on the following:

Transcript/record, essay, extracurricular activities, community service, and financial need, if applicable. Consideration will be given equally to average and above average academic records.

Scholarships will be payable to the college, university, technical institute, or trade program to be attended by the recipient.

APPLICATION FOR THE WOMAN'S CLUB OF BRIELLE SCHOLARSHIP

Applican	t:							
Name (le	gal)							
	First	Middle Initial	Last					
Address _				<u> </u>				
I elephon	elephone Home Cell							
Date of B	irth							
Emaii								
Family:								
Father's N	Name							
Oc	cupation							
Mother's I	Name							
Oc	cupation							
Name(s)	and Age(s) of othe	r children in the family						
Present	Education: Accre	dited school now attend	ding:					
Extracur	ricular Activities:	Use reverse side if nee	eded.					
	Activity	Date of Participation	Office Held	Advisor's Signature				
Employm	ont: including any	ighs you have hold in t	ho last four you	ars. Star (*) work during school				
year.	ient. including any	Jobs you have held in t	ne iast iour yea	is. Star () work during school				
year. 	Job	Employer		Date of Employment				
 Commun	ity Service:							
	Organization	Hours	Date(s)	Representative's Signature (if available				
Ple	ease describe your	role in these organizati	ons					
 Us	e reverse side if ne	ecessary.						

APPLICATION FOR SCHOLARSHIP (CONTINUED)

		ut this scholarship				
	e Education:	avaite, ta alaminal inc	-titt tul		vev plants	
	•	• '		am or required course do ce and enrollment. See 2	•	
01110111	School	ation to notify do of	Location	Have you been		
	What course of	study would you p	olan to pursue?			
		ed for any other so es (if yes, ple	•	No		
	How would you benefit from receiving this scholarship? (Academically and/or financially)					
	Briefly explain	any extenuating ci	rcumstance of whice	ch we should be aware.		
Applio	cation Essay Attach a one-	to-two-page essa	y that will help us	s to know you better.		
PLEAS	SE NOTE THE FO	OLLOWING:				
1		•	• •	larship displacement, rerrship. Check with the fina	•	
2	. Before our ch proof of regis	eck can be sent to tration. Send us pr	your college, univerself of registration	ersity or trade school, we for classes to fita46@yah must receive proof by De	e must receive noo.com by	
I have	read and under	stand the requiren	nents of this applic	ation:		
Stude	nt Signature	Date	Parei	nt/Guardian Signature	Date	