

200 CLUB OF MIDDLESEX COUNTY SCHOLARSHIP APPLICATION 2019/2020 ACADEMIC YEAR

Applicant must be an unmarried dependent of a Middlesex County Public Safety Employee or Volunteer (**minimum 3 years service for new applicants**). The applicant is eligible if a parent works in the county, worked in the county before retirement, or was permanently disabled or killed in the line of duty while employed or volunteering in public safety and working in Middlesex County. **Scholarships apply only to undergraduate full-time students.** All information subject to verification for eligibility.

Please note change of due date for final transcripts
Applications must be received by May 31, 2019 and Final Transcripts by July 15, 2019 to be eligible!

- 1. Name _____
- 2. Address _____
Street _____ City _____ State _____ Zip Code _____
- 3. Phone _____ DOB ___/___/___ Age _____ E Mail _____
- 4. Name of Public Safety Organization: _____ Police () Fire () EMS ()
Years of service _____ Active _____ Retired _____ Deceased _____ Work Phone # () _____
Commanding Officer/Chief's Signature _____ Date _____
- 5. Father's Name _____ Age _____ Occupation: _____ Phone () _____
- 6. Mother's Name _____ Age _____ Occupation: _____ Phone () _____
- 7. Parents' marital status: Married () Separated () Divorced ()
- 8. Parents' gross income as reported on 2018 Income Tax (include salaries, dividends, interest, savings, support etc.) \$ _____
Cover page of IRS form, indicating income, must be signed and submitted. _____
- 9. Total # dependent children: _____ # in college: _____ (Include upcoming year).
- 10. Have you ever received a 200 Club of Middlesex County Scholarship? _____ If so, when? _____
- 11. Have you applied to another 200 Club for a scholarship for 2019 and has it been awarded? _____
- 12. Do you expect to receive any financial aid, scholarships or grants? If yes, what amount _____
Do not include loans
- 13. College/University you are or will be attending: _____
Name and location
Major: _____
- 14. What after school activities, work, sports or community service, are you involved in? _____
- 15. For consideration of the **Scott Arnold Scholarship**, are you working or studying in the EMS field? _____
- 16. If you are a child of an eligible NJST are you applying for the **STFA/Trooper William L. Carroll Jr. Memorial Scholarship**? _____
- 17. To check the status of your application, contact the 200 Club via email edcicchi@icloud.com or via phone 732-599-9372.

Failure to submit all required documents, including signed verification, will disqualify scholarship applicant.

We certify that all of the information contained on this application is true and accurate. We hereby authorize the 200 Club to verify any of the information contained herein.

Father's signature _____ Date _____
 Mother's signature _____ Date _____
 Applicant's Signature _____ Date _____

Note: Scholarship applicable for the upcoming academic year. Unused funds are refundable to the 200 Club. A separate sheet may be used to list any additional circumstances or information you feel may help us in the review of this application.