

JOHN COCULA MEMORIAL SCHOLARSHIP

SCHOLARSHIP APPLICATION ~ 2018
Sussex County Community College <AKA SCCC> ONLY

INSTRUCTIONS AND GUIDELINES FOR COMPLETION OF THIS APPLICATION:

- 1) The applicant must be a Vernon Township resident planning to attend SCCC. The applicant **must be a registered Republican voter.**
- 2) This scholarship is available to any **non-traditional** student who is presently attending or planning to attend SCCC on a full-time and/or part time basis.
- 3) Eligible candidates must return the application to the Scholarship Chairperson, postmarked **no later than March 15, 2018.**
- 4) The Scholarship Committee will hold all applications and other documents in strict confidence.

Name: _____

Date of Birth: _____

Student ID Number (if available): _____

Mailing Address: _____

Telephone #: _____ Email Address: _____

List your present employment, if applicable, and include contact person and phone number:

List names and ages of others living within your household. Indicate those presently attending higher education.

NAME	AGE	COLLEGE	GRADUATE Year
_____	/ /	_____	/
_____	/ /	_____	/
_____	/ /	_____	/
_____	/ /	_____	/

ATTACHMENTS

Please attach the following:

1: A personal typewritten 200 word_essay or more, describing your goals upon graduation from an accredited higher education program and reasons why you should receive this Scholarship. Please include a word count on the heading of your essay.

2: TWO (2) letters of recommendation one from the school community and one from outside the school Clergy, Employer, community figure, an adult acquaintance known to the applicant for at least two years. Contact phone numbers for references must be included.

