

# PASSAIC COUNTY 200 CLUB SCHOLARSHIP APPLICATION



PASSAIC COUNTY 200 CLUB  
3 Garret Mountain Plaza  
Suite 204  
Woodland Park, NJ 07424  
PC200Club.org  
973.225.0696

ELIGIBILITY REQUIREMENT: THE STUDENT MUST BE A GRADUATING HIGH SCHOOL SENIOR. YOUR PARENT OR GUARDIAN MUST BE A MEMBER OF A FIRE DEPARTMENT, EMS, POLICE DEPARTMENT, STATE OR FEDERAL, WHO RESIDES AND/OR WORKS IN PASSAIC COUNTY.

Date:

## Parent or Guardian Sponsoring Applicant:

Name:   
 Address:   
 Town/State/Zip:   
 Home/Cell Number:   
 Employer:   
 Name of Department:   
 Position:   
 Town/City:   
 Please Check One:  Active  Retired  
 Disabled  Deceased

Please Check One:  Paid  Volunteer

## Spouse or Guardian of Sponsoring Parent/Guardian:

Name:   
 Occupation:

## Financial Information (Please attach Current W-2 Form)

### Annual Household Income Earnings:

\$20,000-\$40,000  \$41,000-\$60,000  
 \$61,000-\$80,000  \$81,000-\$100,000  
 Other

Ages of Siblings Dependent of Family Resources:

### List All Scholarships/Loans/Grants And Amounts Received:

### Estimated Cost of Education Per Academic Year:

<input type="text"/>	Tuition	<input type="text"/>	Room/Board
<input type="text"/>	Fees	<input type="text"/>	Books
<input type="text"/>	Total		

## Applicant Information

Name:   
 Address:   
 Town/State/Zip Code:   
 Date of Birth:   
 Home/Cell Phone:   
 E-Mail:   
 Are you Currently Employed?:   
 If Yes, Where?:   
 Current Postion:   
 Hourly Wage:   
 Approximate Hours Per Week:

### Indicate Any Community Service you Have Taken Part In:

### Have you Received any Awards Or Honors For Outstanding Accomplishments Unrelated to School:

### School Attending or Schools Applied To:

Anticipated Major:   
 Career Goal:

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APPLICANT NAME

**ESSAY: PROVIDE A 500 WORD OR LESS ESSAY "WHY YOU WOULD CONSIDER A CAREER IN PUBLIC SERVICE."  
IF YOU ARE NOT PURSUING A CAREER IN PUBLIC SERVICE, DESCRIBE YOURSELF, YOUR FUTURE, PERSONAL,  
ACADEMIC AND CARREER PLANS.**

**IF YOU NEED MORE ROOM PLEASE TYPE OR PRINT LEGIBLY ON A SEPARATE SHEET OF PAPER**

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APPLICANT NAME

**STATE ANY SIGNIFICANT CIRCUMSTANCES (FAMILY, FINANCIAL OR OTHERWISE) WHICH YOU WISH TO BRING TO THE ATTENTION OF THE COMMITTEE:**

## SIGNATURES

APPLICANT:	<input type="text"/>	DATE:	<input type="text"/>
PARENT/GUARDIAN:	<input type="text"/>	DATE:	<input type="text"/>
PARENT/GUARDIAN:	<input type="text"/>	DATE:	<input type="text"/>

**\*To Be Completed by Guidance Counselor\***  
**\*Must Attach Proof Of SAT/ACT Scores\***

GPA:	<input type="text"/>
Rank in Class:	<input type="text"/>
SAT/ACT Scores: W: V: M:	<input type="text"/>
Special Awards/Honors:	<input type="text"/>
Extra Curricular Activities/Sports (School Related):	<input type="text"/>
Guidance Counselor: Signature,Date:	<input type="text"/>

**RETURN APPLICATION AND ALL ATTACHMENTS TO:  
THE PASSAIC COUNTY 200 CLUB  
C/O MAJOR HEIDI SCRITPURE  
7 NEMIC LANE, WHIPPANY, NJ 07981**