



THE TWO HUNDRED CLUB OF UNION COUNTY

# Student Scholarship Application

**For Children of Active  
Police and Firefighters of Union County**

*Application Is Due In The Business Office No Later Than March 2  
No Exceptions*

THE TWO HUNDRED CLUB OF UNION COUNTY

1435 Morris Avenue, 3rd Floor, Union, NJ 07083 • (908) 206-0200 • Fax (908) 686-5445

[uc200club.org](http://uc200club.org)



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## HISTORY

The Two Hundred Club of Union County is a non-profit organization formed in 1968 to provide financial assistance to the dependents of members of the police and firefighters of the various municipalities in Union County and the State Police of New Jersey, who have lost their lives in the line of duty.

The Club was founded on the premise of ensuring that our uniformed protectors and their families are never ignored or forgotten, encourages them to do their best and commends them on their achievements in the line of duty.

The scholarship program was established in 1983 to aid children of actively serving public safety personnel in their desire to attend college, vocational school or to acquire other post-high school education. Scholarships are awarded at the discretion of the Board of Trustees.

## ELIGIBILITY

Applications will be limited to high school seniors who have a parent actively serving Union County in one of the following branches of public safety:

- Police Officers
- Firefighters (including volunteer firefighters)

*\* Eligibility is limited to the children of public safety personnel engaged in the branches reflected above only. It does not include children of personnel working in clerical or other non-related public safety duties. Children of members of THE TWO HUNDRED CLUB are ineligible.*

## GENERAL INFORMATION

Applications for the following academic year (i.e. September – July) must be received in the business office no later than March 2 (no exceptions). The application should be completed and mailed or faxed to:

THE TWO HUNDRED CLUB OF UNION COUNTY

1435 Morris Avenue, 3rd Floor

Union, NJ 07083

Fax 908-686-5445

The applicant must arrange with the school's guidance counselor for the forwarding of his or her Secondary School Transcript (excluding test data). The School's recommendation should specifically address the student's character and citizenship.

## SCHOLARSHIP AWARDS

Scholarships are awarded annually and will depend upon the financial resources and budgetary constraints of the Club.

Applicants will be judged on the basis of financial need, academic achievement, S.A.T. scores, class standing, and citizenship. The Scholarship Committee of the Board of Trustees will coordinate the processing of all applications for review and selection. The Board of Trustees will ultimately approve the scholarship awards.

Announcement of the awards will be made in May at the Annual Valor Award Luncheon and recipients and their parents are expected to attend as our guest. Scholarship payments will be made directly to the educational institution each semester.

Scholarships are renewable each year upon re-application by the student, proof of academic eligibility and approval of the Scholarship Committee.

The Board of Trustees reserves the right to discontinue the scholarship program at any time.

## TO QUALIFY:

- A parent must be actively serving in Union County as a police officer or firefighter.
- Student Status: The applicant must be a bona fide member of the June graduating high school class of the Effective Academic School Year.
- Diploma Requirements: The applicant must be eligible to receive a high school diploma prior to September 1st, of the effective Academic School Year.
- School Attendance: The applicant must be a bona fide student in any private, parochial or public high school located in or out of Union County.
- Aspirations: The student must have a definite plan to pursue a post-high school program of education or training on a full time basis.
- Character: The applicant must have exhibited good citizenship traits and be of sound moral character.
- Final Awards will be based on individual interviews with the Scholarship Committee

# Student Scholarship Application



## PERSONAL DATA (PLEASE PRINT)

**APPLICATIONS THAT ARE INCOMPLETE AND/OR LACK REQUESTED INFORMATION WILL DISQUALIFY THE STUDENT FROM CONSIDERATION.**

This application must be fully completed and returned with the following:

1. Secondary School Transcript
2. School Recommendation

-   -      
(Social Security No.)

Name \_\_\_\_\_  
(Last) (First) (Middle Initial)

Gender:  Male  Female Age \_\_\_\_\_ Your Expected Date of HS Graduation: \_\_\_\_/\_\_\_\_/20\_\_\_\_

Home Address \_\_\_\_\_  
(Number & Street) (City or Town) (State) (Zip Code)

Home Phone (\_\_\_\_) \_\_\_\_\_ Alternate Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_ Alternate Email Address \_\_\_\_\_

Secondary School \_\_\_\_\_

Date of Graduation \_\_\_\_\_

Other Secondary Schools Attended \_\_\_\_\_

Mother's Occupation \_\_\_\_\_

Father's Occupation \_\_\_\_\_

Municipality \_\_\_\_\_

I certify that all information submitted on this form is true and correct to the best of my knowledge.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Father \_\_\_\_\_ Date \_\_\_\_\_

Signature of Mother \_\_\_\_\_ Date \_\_\_\_\_

**APPLICATION MUST BE RECEIVED BY SCHOLARSHIP COMMITTEE BY MARCH 2**

*The Information You Provide Is Held Strictly Confidential And Will Be Used Solely By The Scholarship Committee For Selection Purposes Only. You may attach a separate sheet if there is not enough space provided on the form below.*

Please list the extra curricula and community activities in the order of importance to you. Include the activity, dates of participation, hours per week and the position you held:

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Please list your work experience by giving the job, employer, dates and hours per week on the job. Also include any work you plan for next summer:

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Give a brief statement as to why you want to pursue further education or training, with any additional comments such as hobbies, work and recreational experiences, which you feel might be of interest to the selection committee:

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Have you or your parents applied for and/or received other scholarships or financial aid?  Yes  No

If yes, state amount(s) and from what source(s) \_\_\_\_\_

Provide any additional information regarding your financial position you would like to share with the committee:

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Father's Income (Most Recent Fed1040)\_\_\_\_\_

Family Net Worth (assets minus liabilities)\_\_\_\_\_

Mother's Income (Most Recent Fed1040)\_\_\_\_\_

Number siblings under 18 years of age at home \_\_\_\_\_

**IMPORTANT:**  
FAILURE TO FULFILL ALL  
THE REQUIREMENTS REQUESTED  
WILL NULLIFY YOUR APPLICATION.  
APPLICATIONS MUST BE RECEIVED  
IN THE OFFICE NO LATER THAN  
MARCH 2nd OF YOUR SENIOR YEAR.