



THE TWO HUNDRED CLUB OF UNION COUNTY

# Student Scholarship Application

**For Children of  
Police, Firefighters and Law Enforcement Personnel  
of Union County**

THE TWO HUNDRED CLUB OF UNION COUNTY

222 Park Avenue, Scotch Plains, New Jersey 07076 • (908) 322-2422 Fax (908) 322 -9505



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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 and Law Enforcement
- Fire Department (including volunteer firefighters), State Police living in Union County, the Prosecutor's Office, and the Sheriff's Department
- The Union County Prosecutor's Office
- The Union County Sheriff's Office

*\*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 no later than March 1st. The application should be completed and mailed to:

THE TWO HUNDRED CLUB OF UNION COUNTY  
222 Park Avenue  
Scotch Plains, New Jersey 07076

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 academic achievement, financial need, 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 normally be made in May at an appropriate awards assembly. Payments will be made directly to the institution each semester.

Scholarships are renewable each year upon re-application, 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 Union County in a branch of public safety.
- 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 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.

Effective Academic School Year 20\_\_\_\_ / 20\_\_\_\_

(Enter Current Applicable School Year)

# Student Scholarship Application



## PERSONAL DATA (PLEASE PRINT)

<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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(Social Security No.)

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

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

Present Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

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

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

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

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

Municipality \_\_\_\_\_

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

We certify that all information submitted on this form is true and correct to the best of our knowledge and belief.

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

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

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

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

1. Secondary School Transcript
2. School's Recommendation

**APPLICATION MUST BE RECEIVED BY SCHOLARSHIP COMMITTEE BY MARCH 1st.**

Please list the extra curricula and community activities in the order of their 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 of 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: (Use additional sheet, if necessary)

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

If yes, describe \_\_\_\_\_  
\_\_\_\_\_

Father's Annual Income \_\_\_\_\_

Mother's Annual Income \_\_\_\_\_

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

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



**IMPORTANT:**  
FAILURE TO FULFILL ALL THE REQUIREMENTS REQUESTED HEREIN WILL NULLIFY YOUR APPLICATION. APPLICATIONS MUST BE RECEIVED BY US NO LATER THAN MARCH 1st OF YOUR SENIOR YEAR.