



ZONTA CLUB OF NORTHERN VALLEY, NJ ADULT SCHOLARSHIP APPLICATION

Name: _____

Address: _____

Telephone # (home) _____ (cell) _____

Email Address (for communication only) _____

Present occupation (if any) _____

Full time _____ Part time _____ (check one)

Education: check below the highest level of school you have completed:

_____ High school (circle year completed) 9 10 11 12

_____ GED

_____ Some College, number of credits completed _____

_____ Associate degree

_____ Other (DESCRIBE) _____

Children's names, ages, school and grade:

First Name	Last Name	Age	School	Grade

Name of the college/school/vocation training center where you are presently enrolled OR where you have been accepted. **Attach** a letter of acceptance or proof of attendance (an official transcript will be acceptable).

What is the tuition and/or total cost (per year) at the college, school or vocation training center you plan to attend or are attending? \$ _____



ZONTA CLUB OF NORTHERN VALLEY, NJ ADULT SCHOLARSHIP APPLICATION

(Intended) Course of study: _____

List all sources and amounts of probable income to help finance your education:

Federal grant(s) _____

Financial aid: _____

Work scholarship: _____

Other: _____

For the questions below (1, 2 and 3), please answer on a separate piece of paper noting the number of the question. Please keep to the stated length and make sure your name is on every sheet.

- 1. Describe your educational and career goals. (limited to 200 words)**
- 2. Please describe your family circumstances and your specific need for this scholarship. (limited to 150 words)**
- 3. Please tell us why you feel you should be considered for the Zonta Club of Northern Valley Adult Scholarship. (limited to 150 words)**



ZONTA CLUB OF NORTHERN VALLEY, NJ ADULT SCHOLARSHIP APPLICATION

Please provide reference letters from those named below. Also provide address, and telephone number of the two (2) character references:

Name	Address	Telephone number

I certify that all statements contained in this application are true and correct.

Signature of applicant

Date

RETURN TO: Adult Scholarship Committee, c/o Mary Ann Tarantula,
1 Elder Ave., Bergenfield, NJ 07621

APPLICATION MUST BE POSTMARKED BY FEBRUARY 27, 2010