

Contemporary Club of Hasbrouck Heights Scholarship Form

Student's Name:

Address:

Telephone Number:

Parents/Guardian's Name & Address:

This scholarship will be given to a HS Senior pursuing higher education in the following 3 fields of study:

Nursing
Teaching
Political Science

List of Colleges where you have been accepted:

College you plan to attend and why:

Professional plans after college:

College Costs:

Have you been awarded any other scholarships? (if yes) state amount:

Write briefly on reverse side your reason for needing scholarship aid, also list your interests, community and extra-curricular activities, honors & future plans.

Signature of Applicant

Signature of Parent/Guardian

Date: _____

