

HASBROUCK HEIGHTS MEN'S ASSOCIATION, INC.

HASBROUCK HEIGHTS, NEW JERSEY 07604

Steven R. Bizik Memorial Scholarship

Academic / Community Service Scholarship

The **Steven R. Bizik Scholarship** was established in honor and memory of **Steven R. Bizik**, a former student and charter member of the Hasbrouck Heights Men's Association. This scholarship is awarded to the student(s) who have exhibited **outstanding achievement in the classroom** as well as performing **community service** beyond what is required throughout their high school career. The scholarship will be awarded to a worthy student and resident of Hasbrouck Heights who is graduating from High School and who is going to continue his or her education. Those meeting these requirements may apply for this scholarship.

If additional space is needed for any of the questions, an extra sheet of paper may be attached, but please number each answer with the topic number.

1) Student's full name _____

2) Student's address _____

3) Date of birth _____

4) Schools attended (9th– 12th grades) - School _____ Years attended _____ -

School _____ Years attended _____

5) SAT and/or ACT scores _____

(A copy must be attached or application will be void)

6) Scholastic honors and awards _____

7) Extra-curricular activities while in High School, any leadership positions held; attach a separate sheet if necessary _____

8) Member of organizations (If so offices held) _____

9) Name of the schools to which you have been accepted _____

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10) Which school do you expect to attend? Why? _____

11) Have you been granted scholarships or financial aid? _____

12) List any activity in which you have participated that is related to community service _____

13) Positions held in gainful employment (List period of employment, average time employed each week, earnings)

14) Family information; a) Number of siblings _____ b) Number of siblings in college _____

c) Any unusual circumstance, please explain _____

_____ 15)

Explain in you own words how this scholarship will benefit you _____

Student's Signature Date

Parent / Guardian's Signature Date