**BSCA 2024 SCHOLARSHIP PROGRAM**

Berkeley Shores Civic Association is offering two $1000.00 scholarships for 2024 graduates. Scholarships will be awarded to a qualifying high school senior (regardless of the high school they attend) whose families (parents or grandparents) are BSCA members in good standing and/or a graduating senior from Central Regional High School who is a resident of Berkeley Township.

We encourage BSCA members’ students to submit a completed application packet for consideration to the BSCA Scholarship Committee.

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**ELIGIBILITY CRITERIA:**

* Any graduating student from Central Regional High School who is a resident of Berkeley Township
* A graduating student from any high school whose parents or grandparents are current BSCA members in good standing
* Qualifying candidates must enroll in a two or four year educational institution
* Applicants must submit a complete application packet which should include:

- completed application

- essay of 400 to 600 words; essay should be typed and neatly presented on the following topic:

**WRITE AN ESSAY THAT IS ABOUT EITHER A POSITIVE OR NEGATIVE EVENT IN YOUR LIFE.  DISCUSS HOW THE EVENT AFFECTED YOU AT THE TIME IT OCCURRED AND HOW IT HAS IMPACTED YOUR DECISIONS REGARDING YOUR FUTURE**

**SUBMISSION DATES:**

* Central Regional High School students must complete and submit the application packet thru the CRHS Scholarship Classroom by the posted deadline
* Students whose parents / grandparents are BSCA members in good standing, but do not attend CRHS, must mail the completed application packet to the address below by **APRIL 12, 2024.**

**COMPLETED PACKET WILL INCLUDE:**

* COMPLETED APPLICATION
* H.S. TRANSCRIPT THAT INCLUDES GPA
* ACTIVITIES (BOTH IN / OUT OF SCHOOL)
* ESSAY
* **ONLY COMPLETE APPLICATION PACKETS WILL BE CONSIDERED**

**JIM BADAVAS**

**BSCA SCHOLARSHIP COMMITTEE**

**P.O. BOX 134**

**BAYVILLE, NJ 08721**

**BERKELEY SHORES CIVIC ASSOCIATION**

**2024 SCHOLARSHIP APPLICATION**

**A SUDENT MAY APPLY FOR THIS SCHOLARSHIP IF HE / SHE IS:**

* A graduating student from Central Regional High School who is a resident of Berkeley Township
* A graduating student from any high school whose parents or grandparents are current BSCA members in good standing
* Graduating and enrolling in a two or four year higher educational institution

**BSCA MEMBER’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**MEMBER’S ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**RELATIONSHIP TO THE APPLICANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**STUDENT’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOME ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PARENT / GUARDIAN’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HIGH SCHOOL COUNSELOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**BERKELEY SHORES CIVIC ASSOCIATION**

**2024 SCHOLARSHIP APPLICATION**

Provide the name(s) of the higher educational institution(s) to which you have applied:

**INSTITUTION NAME INTENDED MAJOR**

**Additionally,** attach a typed list of your clubs, sports, jobs, awards, events, honors, programs, and special recognitions attained while in high school. Include the grade(s) in which you participated in the activity and the position you held (member, president, captain, team leader).

I understand I must return to this donating organization all funds if I do not enroll in a two or four year educational institution.

I authorize the sharing of my completed application with the BSCA Scholarship Committee members. I also authorize the release of my high school transcript.

**DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STUDENT SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF PARENT / GUARDIAN IF STUDENT IS NOT 18 YEARS OF AGE:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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