

New Jersey State Policemen's Benevolent Association
Mainland Local #77
6712 Washington Ave. Suite 104
Egg Harbor Twp., NJ 08234
609-645-7677

Scholarship Application

To Be Completed By Applicant

Due to Mainland P.B.A. February 28th of the year of High School Graduation

High School Attending _____

Name _____ SS# _____

Home Address _____

Home Phone _____ DOB _____ Age _____

Employment (job title & employers address) _____

Parent (s) Name _____

Fathers Employer & Job Title: _____

Mother's Employer & Job Title: _____

Family's Gross Income: _____

Family Members at home: Sisters _____ Brothers _____ Other _____

Community group's or charitable affiliations: _____

After school activities _____

College (s) applied to and annual tuition costs: _____

College Major _____

To Be Completed by Guidance Office

Applicant Name _____

Applicant's Address _____

Discipline Record Yes _____ No _____ Class Ranking _____

School activities that this student has participated in as a member: _____

Any special needs particular to this student: _____

Guidance Office Representative Name (please print) _____

Signature of Guidance Rep. _____

Phone number that you may be reached at: _____

Date of scholarship ceremony and location _____

****Copy of academic history must be attached****

Due date February 28th of the year of High School Graduation

A MINIMUM Grade Point Average (GPA) of 2.5 MUST be obtained in the first semester of college to receive payment of this scholarship.