

JOHN COCULA MEMORIAL SCHOLARSHIP
APPLICATION
(March 2023)

INSTRUCTIONS AND GUIDELINES FOR COMPLETION OF THIS APPLICATION

The applicant must be a resident of the City of Garfield who participates in sports on some level.

This Scholarship is available to any high school senior applying to an accredited higher education program on a full-time basis.

Eligible candidates will, upon completing this application, return the application **postmarked no later than March 15, 2023**. Official transcripts may be sent directly from the high school.

All applications and other documents will be held in strict confidence by the Scholarship Committee.

Student's Name: _____

Date of Birth: _____

Student College I.D. Number: _____

Mailing Address: _____

Telephone # : _____ Email Address: _____

List your present employment, if applicable, and include contact person and phone number:

List number and ages of others living within your household. Indicate those presently attending college.

NAME	AGE	COLLEGE	GRADUATE (YEAR)
_____	/ /	_____	/
_____	/ /	_____	/
_____	/ /	_____	/
_____	/ /	_____	/
_____	/ /	_____	/

ATTACHMENTS

Please attach the following:

1: A personal typewritten 200 word essay or more, describing your goals upon graduation from an accredited higher education program and reasons why you should receive this Scholarship. Please include a word count on the heading of your essay.

2: TWO (2) letters of recommendation one from the school community and one from outside the school Clergy, Employer, community figure, an adult acquaintance known to the applicant for at least two years. Contact phone numbers for references must be included.

MORE than two (2) letters will disqualify the applicant.

3: A one (1) page sports/activity sheet which includes extracurricular activities, awards, community service, vocational or religious and work experience.

4: A copy of your high school transcript.

IF ALL INFORMATION LISTED ABOVE IN 1, 2, 3 or 4 IS NOT INCLUDED, THIS APPLICATION WILL NOT BE PROCESSED.

It must be understood and agreed upon by the Scholarship Winner(s) that if an emergency situation necessitates their withdrawal from an accredited higher education program within their first year, the winner(s) must notify Andrea Cocula at 973-222-8915 or email: bunny123@warwick.net .

Should the winner(s) of the Scholarship withdraw from the higher education program within the first year, the entire scholarship must be returned to the John Cocula Memorial Scholarship Fund 12 months from the date that the scholarship was awarded.

Verification and Signature

My signature below attests to the truth of all of the information that I have filled out in this Scholarship Application. To the best of my knowledge, all of the information is correct and complete. Any misinformation will disqualify me this scholarship.

_____ Date: _____
(Signature)

Please see that the Application and all attachments are mailed and postmarked NO LATER THAN **March 15, 2023** to:

Andrea :Bunny” Cocula
859 Route 517
Glenwood, NJ 07418
bunny123@warwick.net
973-222-8915

Please Note: The Scholarship will be awarded as follows One (1) check in the amount of \$??? to be issued in June, the second check in the amount of \$??? will be issued in December/January only after the student’s grades and proof of enrollment in the second semester are forward to the name and address listed above.

In the event the student does not supply the required documentation to receive the balance of the scholarship, then, after a period of 12 months from date the scholarship was awarded, , the balance of said scholarship will revert back to the scholarship fund.

The student must maintain a grade average of 3.0 to receive the second \$??? check. An official transcript from the college to show proof of enrollment and grade point average is necessary before the second check of \$??? will be awarded.