331 DOVER-CHESTER ROAD PO BOX 303 IRONIA, NEW JERSEY 07845 (973) 584-7393

IRONIA FIREFIGHTER's MEMORIAL SCHOLARSHIP PROGRAM

APPLICATION PACKAGE

(For both Scholarships)

DUE MAY 1, 2024

MAIL COMPLETED PACKAGE TO

IRONIA FIREFIGHTER'S MEMORIAL SCHOLARSHIP PROGRAM RANDOLPH ENGINE COMPANY 4 PO BOX 303 IRONIA, NEW JERSEY 07845

IRONIA FIREFIGHTER'S MEMORIAL SCHOLARSHIP PROGRAM SCHOLARSHIPS APPLICATION

CRITERIA

Student must have attended Randolph High School a minimum of two years or be the child or grandchild of a member of the Ironia Firemen's Association. Student must graduate from Randolph Township High School or be the child or grandchild of a member of the Ironia Firemen's Association and graduate from an accredited high school. Student must have a grade point average of 2.0 (or equivalent). Student should have a history of community volunteer work. Student can only apply for an undergraduate program.

DEADLINE

Student must mail the application and supporting documentation by May 1, 2024, to the address on the first page of this package. The supporting documentation consists of 1) a complete high school transcript 2) at least one letter of recommendation and 3) a list of activities and references as explained on page 4 of this application. Failure to provide all necessary documentation will disqualify the application.

SCHOLARSHIPS: AMOUNTS & PAYMENT

\$1000 Scholarship will be \$ 1000.00 per year for up to four (4) years. Scholarship will be paid upon receiving proof of maintaining a grade point average of 2.0 (or equivalent) or better for the previous year. This is to be supplied to Randolph Engine Company 4 Scholarship Committee by the student.

\$500 Scholarship will be \$500.00 per year for up to four (4) years. Scholarship will be paid upon receiving proof of maintaining a grade point average of 2.0 (or equivalent) or better for the previous year. This is to be supplied to Randolph Engine Company 4 Scholarship Committee by the student.

STUDENT INFORMATION – TYPE OR PRINT IN INK

Last Name	First Name	MI
Street	City	State
Telephone	Date of Birth	
Father or Male Guardian Name		
Street	City	State
Mother or Female Guardian Name		
Street	City	State

IRONIA FIREFIGHTER'S MEMORIAL SCHOLARSHIP PROGRAM SCHOLARSHIP APPLICATION

Applicant's High School Grade	e Point Average	
List all colleges or post-high so all acceptances.	chool vocational schools to which	h you have applied. Circle
Name of college you will be at	tending:	
Intended major:		
Career goal:		
Approximate expenses for the	first year of school – including T	uition, Fees, and Room
and Board:		
Have you applied for financial	aid? Yes No	_
List employment experiences (attach references if available):	
Employer	Position	Dates of Employment

IRONIA FIREFIGHTER'S MEMORIAL SCHOLARSHIP PROGRAM SCHOLARSHIP APPLICATION

Please attach to this form a list of all-extracurricular activities, organizations, sports, and volunteer work (including offices held) in school and in the community. Explain the function, purpose and/or goals for the activity and indicate the extent of your involvement. Please provide references for each.

best of our knowledge. We authorize	plication and that it is accurate and complete to the e the release of records and the information on this nittee of the Randolph Engine Company 4.
Applicant:	Parent or Guardian:
Date:	Date: