



**Application to New Jersey State Grange
for the Morris Grange No. 105
Scholarship Grant Fund**

To: Robert Poling, Administrator Education Funds
New Jersey State Grange Morris Grange Grant Fund
250 Paulson Road
Wrightstown, NJ 08562

Date: _____

*I hereby enter my application for a
New Jersey State Grange Morris Grange Grant Fund Scholarship.*

Biographical

1. Name: _____

Address: _____

2. Social Security #: _____ Birth Date: _____

Phone: _____ E-Mail: _____

3. Father's Name: _____ Occupation: _____

Mother's Name: _____ Occupation: _____

Address: _____

4. Marital Status: Single Married Number of children: _____

5. Name and address of a person other than parents who would have knowledge of your whereabouts:

Name: _____

Address: _____

Qualifications

(Complete only applicable portions)

6. Name of Parents or Grandparents who are/were members of the Grange:

A. Their addresses: _____

B. Name of their Grange: _____

7. Name of Grange in which you are a member in good standing (if applicable):

Future Schooling

8. To what College or University should check be sent?

Name: _____

Address: _____

Mailing Address of Financial Aid Office: _____

9. What course (or major) do you intend to pursue? _____

10. If this is for Post-Graduate work, where and when did you complete your undergraduate work?

Educational Experience

11. Graduated from _____ High School, Year: _____

12. Expect to graduate from _____ High School,

Month: _____ Year: _____

13. Average grade at the end of the last marking period or semester was: _____

14. I participated in the following extracurricular activities (list organizations and offices held, if any):

15. What honors or distinctions have you received? _____

Financial

16. Have you applied for, or been granted, other financial aid or scholarships?

Yes No If yes, give particulars: _____

17. Why are you applying for this Grant? _____

Certification

I certify that the above information is true and correct, to the best of my knowledge and belief.

Sworn to and subscribed before me this _____ day of _____, 20_____.

Applicant

Notary Public

My commission expires: _____