HACKENSACK HIGH SCHOOL PTSA
SCHOLARSHIP APPLICATION
(Revised May 30, 2016)

Criteria for Scholarship Application

Applicant must be a member of the current graduating class of Hackensack High School.

**Academic Achievement (Class Rank and Grade Point Average (GPA))**
Student receives letter from guidance with their class rank. **Student is required** to attach this letter to the application. **Student must contact their guidance counselor for latest transcript with your GPA.**

**Goals Essay**
Clear articulation of the answer to the question.

**Service**

*Only include service activities for High School Years.*
- School-based activities, including sports, clubs & extracurricular activities.
- Non-School/Outside Activities (examples: Town recreation sports teams, sports club teams, boy scouts, girl scouts, etc.).
- Community Volunteer Service (examples: volunteer at a camp for disabled or church activities such as CCD teacher/assistant, etc.). Verification of hours required. See attached form.

**Employment**
(Not required but consideration in scoring application.)
- Employment (examples: babysitting, camp counselor, retail sales)

**Three (3) Recommendation Letters are required.**
- One (1) letter from a HHS personnel (examples: teacher, guidance counsel, coach)
- Two (2) letters from your choosing.

**Membership in HHS PTSA**
Current HHS PTSA membership by student applicant and parent/guardian is **required by January 31.**

**Completeness of Application**
1. All information requested **must be** included, in addition to sealed transcript.
2. Application **must be typed.** If you need a Word Document of the application, contact the PTSA at hackensackhighschoolptsa@gmail.com.
3. Any false information submitted will disqualify application.
4. Any omitted information will disqualify application.

**INFORMATION CAN AND WILL BE VERIFIED**
I. Biographical Data

Name (Last, First, MI)
______________________________________________

Date of Birth:
______________________________________________

Address:
______________________________________________
______________________________________________

Telephone Number:
______________________________________________

Email Address:
______________________________________________

PTA Membership: Name of ALL PTSA Members
______________________________________________
______________________________________________

II. Academic Achievement

Applicant Rank #________ in a class of _________

Grade Point Average (GPA): ____________
III. Service

(May be submitted as attachment if needed. If no activities, please indicate in each area.)

**SCHOOL ACTIVITIES**

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<thead>
<tr>
<th>School Activity</th>
<th>Offices Held/Awards Received</th>
<th>Grades/Dates</th>
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**COMMUNITY VOLUNTEER ACTIVITIES**

(Summarize here and attach Community Service Information and Verification Form for each volunteer activity. Form attached for your convenience.)

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<th>Activity</th>
<th>Offices Held/Awards Received</th>
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**NON-SCHOOL/OUTSIDE ACTIVITIES**

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<th>Activity</th>
<th>Offices Held/Awards Received</th>
<th>Grades/Dates</th>
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IV. EMPLOYMENT

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<th>Type of Work</th>
<th>Hours/Week</th>
<th>Dates</th>
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V. Goals

List three (3) colleges, universities, trade schools or other higher education programs (in order of preference) to which you have applied:

1. 
2. 
3. 

What is your planned major area of study? ______________________________
Goals Essay

In 200 to 500 words please answer the following question. May be submitted as an attachment, if needed.

1. Using an example of an activity from Section III of this application, describe how and why it impacted your life and the decisions you have made for your future.

Signature: __________________________________ Date: ________________________
CHECK LIST

The following items **MUST** be attached to this application.

1. Letter from Guidance verifying your class rank.

2. Transcript verifying your grade point average (GPA).

3. Verification of Community Volunteer Activities form.

4. Three (3) recommendation letters:
   - One (1) letter from a HHS personnel (examples: teacher, guidance counselor, coach)
   - Two (2) letters from your choosing (examples: organization for which you volunteered, employer, etc.).
Community Service
Information and Verification

Student Name: ___________________________ Age:______

School Name:____________________________________

Current Grade:___________ Homeroom:____________

Event for Community Service:_______________________

Location of Service:________________________________

Date(s) of Service:________________________________

Task or service performed:__________________________

Duration of Service:________________________________

Verification of service:

**Organization Name:**____________________________

Verifying Signature:________________________________

Print Name:_______________________________________

Position or Title:__________________________________