2016-17 WINSTON E. PARKER SCHOLARSHIP APPLICATION FORM

The Winston E. Parker Scholarship is for the study of Forestry-Arbiculture & Ornamental Horticulture any specialty thereunder.

RETURN TO: March 11, 2016, Kevin Aberant, The Winston E. Parker Scholarship Committee, c/o Moorestown Rotary Charities, Inc., P.O. Box 105, Moorestown, N. J. 08057

APPLICANT DATA

NAME: ________________________________   RU ID #:              ________________

HOME ADDRESS:     __________________________________  TELEPHONE :        _________________________

MAILING ADDRESS:     ______________________________  TELEPHONE:       _________________________

EDUCATION DATA

SECONDARY SCHOOL: ________________________________________

ADVANCED EDUCATION, College: Please attach an official transcript or an unofficial transcript (registrar.rutgers.edu). For unofficial link to “View Grades” and “Download Full Transcript”. Your name must be on your transcript.

HAVE YOU DECLARD A MAJOR?  (Check one)  YES _________ NO _________

MAJOR IF DECLARED:  _____________________________________________________________

HAVE YOU SUBMITTED A FINANCIAL AID APPLICATION TO THE UNIVERSITY FINANCIAL AID OFFICE?

YES ___ Please attach a copy of current 2015-16 Award/Financial Aid Letter (studentaid.rutgers.edu) Log In: On-line Services “Check Award Status “ 2015-16.

NO ___ (Will be completed by?) __________

LIST OTHER SOURCES OF AID YOU HAVE APPLIED FOR OR ANTICIPATE RECEIVING:

1. ____________________________________________          ____________

2. ____________________________________________          ____________

3. ____________________________________________          ____________

4. ____________________________________________          ____________

PLEASE ATTACH A STATEMENT TO THIS APPLICATION IF THERE ARE SPECIAL CIRCUMSTANCES TO BE CONSIDERED IN DETERMINING YOUR NEED. (PLEASE LIMIT YOUR STATEMENT TO ONE PAGE.)

OTHER PERSONAL DATA

PLEASE LIST EXTRA CURRICULAR OR COMMUNITY SERVICE ACTIVITIES THAT YOU ARE INVOLVED IN.

_______________________________________________________________________________________________________________

_______________________________________________________________________________________________________________

_______________________________________________________________________________________________________________

SIGNATURE

I have completed this application to the best of my knowledge and acknowledge that any misrepresentation included herein may disqualify me from further consideration. I will be enrolled full-time for the 2016-17 academic year.

SIGNED:   ______________________________________  DATE:  ______ ___