

Builders & Remodelers Association of Northern New Jersey



250 Maywood Avenue, Suite B, Maywood, NJ 07607 ■ 201-843-6868 ■ Fax: 201-843-0166 ■ info@brannj.org ■ www.brannj.org

2010 APPLICATION FOR FINANCIAL ASSISTANCE

****A SEPARATE APPLICATION MUST BE COMPLETED FOR THE DURANTE FAMILY SCHOLARSHIP.****

NOTE: Please type or print legibly in blue or black ink. Do not omit any information. **Fill in ALL spaces.** If any item is not applicable, please indicate by writing N/A.

Important: This opportunity is limited to students who live or attend school in Bergen, Hudson, Passaic, or Sussex Counties. These scholarships are available to full or part-time students who currently attend or will attend an accredited institution of higher learning or a vocational training program, pursuing a construction-related course of study.

I. Applicant General Information

Last Name First Name Middle Name

Student's Home Street Address

City State Zip Phone Number

Student's School Street Address *(If you live on campus)*

City State Zip Phone Number

II. Parent/Guardian Information

Father/Guardian's Last Name First Name Phone Number

Permanent Street Address City State Zip

Father/Guardian's Employer Nature of Work Annual Gross Income

Mother/Guardian's Last Name First Name Phone Number

Permanent Street Address City State Zip

Mother/Guardian's Employer Nature of Work Annual Gross Income

List all additional income of parents/guardians (if any): _____

VII. Additional Evaluations of Applicant

Due to the very competitive nature of the Scholarship Awards, any additional evaluations or recommendations from non-relatives such as teachers, counselors, employers, etc. are necessary. Attach letters to the application.

VIII. Applicant's Related Work Experience (if any)

- (1) _____
- (2) _____
- (3) _____
- (4) _____

IX. Additional Information

Is there any other information you would like to provide? _____

X. Essay

You must attach a typed essay (100-200 words) explaining why you are interested in a career in a building/remodeling related field. Please be concise and specific.

XI. Parent/Guardian Certification

To the best of my knowledge, I agree that the information reported herein is complete and correct. I understand that _____ is applying for financial aid to help with the educational expenses that will be incurred at _____. I approve of this application.

Applicant's Name
Institution Name

Parent/Guardian Signature

Date

XII. Applicant Certification

I hereby acknowledge that the information reported herein is complete and correct.

Applicant Signature

Date

Deadline for completed applications is **MAY 7, 2010**. Please mail to: **Builders & Remodelers Association of Northern NJ Foundation, 250 Maywood Ave., Suite B, Maywood, NJ 07607.**

A total of three scholarships are available. *The Donald Van Natta and The Alex Sands Memorial Scholarships for the academic year 2009/2010 will each grant \$1,000. The John J. and Helen M. Durante Family Scholarship will grant \$4,000 to one student (\$2,000 for the first year and \$2,000 for the second year). See Durante Application for more details & requirements.*

****A separate application must be completed to be considered for the Durante Family Scholarship.****