**2021 GATEWAY SCHOLARSHIP FOUNDATION, INC.**

Instructions to students

1. Carefully answer all the questions on the application. Ask your parent/guardian and school counselor for assistance.
2. You must be a **graduating Union County High School senior in New Jersey**, entering an accredited trade or technical school, pursuing a certificate or degree in a wide range of programs. Examples of eligible technical programs in college are computer science, medical technology, nursing, or engineering. Programs in trade or technical schools can include plumbing, welding, cosmetology, culinary arts, and many others. Whether or not you have applied for this scholarship in the past, you may also apply if you are a continuing student in an approved program.
3. The personal statement, which you must attach to this application, is an extension of you. In most cases, it is the only picture of you the Scholarship Selection Committee will see. It is particularly important to:
   1. Type or print clearly.
   2. Sign this application and your personal statement.
   3. Include anything you want to tell the Scholarship Selection Committee that would help them to get to know you better.
4. The Scholarship Selection Committee relies completely upon the application and the materials you provide in selecting scholarship recipients. Be accurate and thorough. Your information will be kept in the strictest confidence.
5. Please Return:
   1. Completed Application
   2. Transcript – Request your High School transcript from your counselor.
   3. Your Biography – Tell us about yourself.
   4. Personal Statement – Why do you need and deserve this scholarship?

**TO: GATEWAY SCHOLARSHIP FOUNDATION, INC.**

C/O Gateway Regional Chamber of Commerce

135 Jefferson Avenue, Elizabeth, NJ 07201

**OR EMAIL TO:** [**CamilaCuevas@gatewaychamber.com**](mailto:CamilaCuevas@gatewaychamber.com)

**The Deadline for Returning all the Material is** **Wednesday, March 31, 2021**

**Please be advised that all documents need to be submitted on time and all together.**

**An incomplete application will not be reviewed.**

***- - - CONFIDENTIAL - - -***

**SCHOLARSHIP APPLICATION**

**GATEWAY SCHOLARSHIP FOUNDATION, INC.**

## STUDENT’S PERSONAL INFORMATION

Student Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

Cell Phone: Click or tap here to enter text. or best number to reach you.

E-Mail: Click or tap here to enter text. If you are selected as a recipient, you will be e-mailed.

Name of Current High School: Click or tap here to enter text.

Address: Click or tap here to enter text.

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Name of College/School You Plan on Attending: Click or tap here to enter text.

Address: Click or tap here to enter text.

Intended Program or Major:Click or tap here to enter text.

Have You Applied? YES  NO  Have You Been Accepted? YES  NO

If you have not applied, what is the reason? Click or tap here to enter text.

***- - - - CONFIDENTIAL - - -***

**SCHOLARSHIP APPLICATION**

**GATEWAY SCHOLARSHIP FOUNDATION, INC.**

**STUDENT’S PERSONAL INFORMATION CONTD.**

1. How do you plan to finance your education?

Click or tap here to enter text.

1. What were your total earnings during the school year and summer?

Click or tap here to enter text.

1. List your activities including any part-time work or volunteer experiences.

(Attach a separate page if needed)

Click or tap here to enter text.

1. What are your career plans?

Click or tap here to enter text.

**Attach your personal statement (One Page, Double Spaced, Typed or Printed) about why you need and deserve this scholarship?**

***- - - CONFIDENTIAL - - -***

**SCHOLARSHIP APPLICATION**

**GATEWAY SCHOLARSHIP FOUNDATION, INC.**

**FAMILY INFORMATION**

Father/Guardian:

Click or tap here to enter text.

E-mail: Click or tap here to enter text.  
Cell Phone: Click or tap here to enter text.

Home Address: Click or tap here to enter text.

Employer: Click or tap here to enter text.

Adjusted Gross Income\* $ Click or tap here to enter text.

\*From IRS form 1040 – line 37

Mother/Guardian:

Click or tap here to enter text.

E-mail: Click or tap here to enter text.

Cell Phone: Click or tap here to enter text.

Home Address: Click or tap here to enter text.

Employer: Click or tap here to enter text.

Adjusted Gross Income\* $ Click or tap here to enter text.

\*From IRS form 1040 – line 37

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1. How many other children are in your immediate family? Click or tap here to enter text.
   1. Age(s) of brother(s) Click or tap here to enter text.
   2. Age(s) of sister(s)Click or tap here to enter text.
2. Are any attending college, trade or technical schools? Click or tap here to enter text.
3. Name(s) of institution(s): Click or tap here to enter text.
4. Please explain any unusual circumstances in your life (examples: serious family illness, foster care, IRS forms not available, etc.)

Click or tap here to enter text.

## TRANSCRIPT RELEASE FORM

TO THE STUDENTS: You **and** your parent/guardian should sign the release form and return it to your school counselor for completion. This authorizes the high school to release a copy of your transcript to the Gateway Scholarship Foundation, Inc.

Signature - Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Click or tap here to enter text.

Signature - Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Click or tap here to enter text.

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***- - - CONFIDENTIAL - - -***

HIGH SCHOOL INFORMATION

Name of Student: Click or tap here to enter text.

Name of High School: Click or tap here to enter text.

Name of Counselor: Click or tap here to enter text.

Counselor’s Comments: Click or tap here to enter text.

Counselor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # Click or tap here to enter text. Date:Click or tap here to enter text.

E-mail Address: Click or tap here to enter text.

Please attach a copy of the student’s transcript with this form and return to us no later than

**Wednesday, March 31, 2021 Mail to:**

**GATEWAY SCHOLARSHIP FOUNDATION, INC.**

C/O Gateway Regional Chamber of Commerce

135 Jefferson Avenue, Elizabeth, NJ 07201

**OR EMAIL TO:** [**CamilaCuevas@gatewaychamber.com**](mailto:CamilaCuevas@gatewaychamber.com)