Car Wash Operators of New Jersey Scholarship Award Application

| Please complete all of the following (print | or type): | | |
|--|-------------------------|----------------------|--|
| Last Name | | | |
| | Middle Initial | | |
| Address | | | |
| City | | | |
| Phone Number | | | |
| Name of High School | | | |
| City, State | | | |
| High School Cumulative GPA | | | |
| ACT or SAT Score | Graduation Date | | |
| Name of car wash employer/sponsor | | | |
| Address | | | |
| City | | | |
| Phone Number | | | |
| Please list high school activities, leadership received, also include any other personal an necessary) | | | |
| | | | |
| | | | |
| Name of accredited two- or four-year colle | ge/university attending | in the fall of 2024: | |
| Please indicate your plans for a major stud | y and why you chose th | nis major: | |
| | | | |
| | | | |

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On a separate sheet of paper, please type or clearly print your response the following question. Your response must be at least 500 words but no longer than 600 words.

Please discuss your present goals. Please discuss relevant personal achievements that have moved you in this direction. Please also discuss how this scholarship will help you achieve these goals.

Mail or fax your application, essay, and letters of recommendation by April 19, 2024, to: CWONJ, PO Box 230, Rexford, NY 12148, Attn: CWONJ Scholarship. Fax 518/280-4767

Questions? Call 518.280.4767

Dear Applicant,

Please find enclosed the application packet for the 2024 Car Wash Operators of New Jersey (CWONJ) Scholarship Award. The CWONJ and your employer are pleased to offer you this exclusive scholarship opportunity.

Please note that recipients will be notified by mail <u>no later than May 1, 2024</u>. Be sure the following are included when <u>your application packet is returned</u> <u>by April 19, 2024</u>:

| Scholarship Application along with attached essay |
|---|
| 2 Completed Letters of Recommendation |
| - One from the CWONJ employer/sponsor |
| - One from someone in the community |
| Copy of acceptance letter or proof of enrollment from the two- or four- |
| year college or university you plan to or are attending. |

Recipients will be evaluated and chosen based on their high school standing, leadership capabilities, community involvement, strength of character, personal achievement, plan of study and future goals.

I wish all applicants good luck! Please do not hesitate to contact us with any questions at 518.280.4767 regarding your application.

Dan Saídel Scholarship Chairman

Car Wash Operators of New Jersey Scholarship Award

PERSONAL RECOMMENDATION FORM

The application deadline is April 19, 2024.