

New Jersey Federation of Dog Clubs

Scholarship Application

(please print or type)

NAME _____ AGE _____ SEX _____

PRESENT ADDRESS _____

PRESENT TELEPHONE _____

HOME ADDRESS _____

HOME TELEPHONE _____ EMAIL ADDRESS _____

PARENTAL INFORMATION:

NAME ADDRESS TELEPHONE

FATHER _____

MOTHE _____

EDUCATION:

HIGH SCHOOL _____ YEAR GRADUATED _____

COLLEGE _____ YEAR GRADUATED _____

GRADUATE SCHOOL _____ YEAR GRADUATED _____

PRESENT SCOOOL STATUS AND CLASS STANDING _____

PLEASE FURNISH ANY INFORMATION AS TO

A - HONORS OBTAINED OR PAPERS PUBLISHED

B - VETERINARY RELATED ACTIVITIES OR POSITIONS HELD

C - HOW YOU LEARNED OF NJFDC SCHOLARSHIP PROGRAM

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APPLICANT INCOME INFORMATION:

YEARLY SALARY _____ OTHER SOURCES _____

HOW HAS APPLIANT FINANCED EDUCATION TO DATE

COLLEGE _____

GRADUATE SCHOOL _____

VETRINARY SCHOOL _____

TYPE OF VETERINARY PRACTICE PLANNED AFTER GRADUATION & LOCATION

WHY DOES THE APPLICANT NEED AND DESIRE THIS SCHOLARSHIP?

Note: To apply for this scholarship, send the following items to the Scholarship Committee Chairman at
735 Park Avenue, Collingswood, NJ 08108

- This completed application
- Official transcripts of undergraduate, graduate and veterinary credits and grades
- Two letters of reference: One letter should be personal and one should be of a professional nature (School Administrator, Faculty, Veterinarian, etc.) The personal reference should not be from members of the applicant's family.
- Proof of residency in New Jersey