COMMUNITY FOUNDATION OF NEW JERSEY

JOHN J. AND HELEN M. DURANTE AND FAMILY CHARITABLE TRUST SCHOLARSHIP 2025

Builders Association of Northern New Jersey

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

The John J. and Helen M. Durante and Family Charitable Trust Scholarship is awarded to an Americanborn graduating high school senior who is pursuing a career in the building industry. Building industryrelated courses are any curriculum that prepares the student for a career in any facet of the building industry, including but not limited to, Drafting and Design, Construction Technology, Mechanical Contracting, Air Conditioning and Heating Technology, Real Estate and Marketing, Electrical Engineering, Architectural Design, Surveying, Civil or Industrial Engineering, Electronic Engineering Technology, Environmental Technology, Land Use Management, Construction Management, Planning, Landscape Architecture, Urban Design and Interior Design.

Criteria:

- Student must live in one of these seven counties: Bergen, Passaic, Hudson, Sussex, Morris, Essex & Union. Scholarship is awarded to a New Jersey graduating senior who is pursuing a career in the building industry.
- Student must be an American born U.S. citizen.
- Scholarship has two installments but is non-renewable.

The scholarship award of \$4,000 will be distributed as follows:

- Installment 1 for \$2,000 will be paid during the student's first year of study (fall semester).
- Installment 2 for \$2,000 will be distributed for credit to the student's account for his/her second year of study (sophomore year) following receipt of a letter of request indicating community service work and/or name and contact information of the employer, official transcript indicating major (building industry related), and proof of full-time enrollment as a student in good academic standing.

Important Note: <u>To qualify for the second installment of the scholarship the student must have</u> <u>maintained a "C" (2.0) or better grade point average.</u> <u>In addition, the student must be involved in</u> <u>community service (minimum of 15-20 hours per year) or hold a job.</u>

All awards will be mailed directly to the educational institution for credit to the student's account.

Please refer to the last page for the required attachments to the application.

COMMUNITY FOUNDATION OF NEW JERSEY JOHN J. AND HELEN M. DURANTE AND FAMILY CHARITABLE TRUST SCHOLARSHIP 2025 BUILDERS ASSOCIATION OF NORTHERN NEW JERSEY

Note: Scholarship is contingent upon the availability of funds in any given year. Scholarship aid from the Community Foundation of New Jersey is conditioned upon the school the student will attend agreeing that the aid should be applied to the student's unmet need or loans first. If, after all needs have been met, scholarship monies remain, it may be used to displace school-provided aid in the following progression: work-study, then grants.

> Only high school senior students need to apply. Application must be received no later than April 1st. For further information or questions, please contact Colleen Smith at <u>csmith@cfnj.org</u> or 973.267.5502.

APPLICANT CONTACT INFORMATION

Check one:	Mr. Ms.							
		First			Middle		Last	
Permanent Address:								
		Street						
		City			State		Zip	
Phone Number:				_	Cell Pho	าe:		
Email Address:				_	Date of I	Birth:		
Country of Birth:				-	Are you	a legal residen	t of NJ: Yes	No
l am a: 		tizen nent Resident A esident – type o						
Gender:	Femal	2		Male				
Ethnicity:	Asian/	n American Pacific Islander can Indian/Alask	an Native	2	\) Hispanic origin)	

FAMILY INFORMATION

Father/Guardian	Mother/Guardian
Address	Address

Father/Guardian's Occupation/Employer	
Father /Guardian's Annual Income	
Mother/Guardian's Occupation/Employer	
Mother/Guardian's Annual Income	

All Dependents Living In Your Home including yourself

Name/Relationship to Applicant	Age	School Attending/Cost
	Self	

EDUCATION

(Only students who have already been accepted into an educational institution are eligible to apply. <u>If you have</u> not yet been accepted to a college, university, or other institution of higher learning, please do not apply at this <u>time</u>.

Name of School You Will Attend:_____

City	State	ZIP
Intended Major(s):		
Intended Minor(s):		

ANTICIPATED EDUCATIONAL EXPENSES

Please fill in your anticipated expenses for the 2025-2026 academic year. This information can be found on your college or university website or through the financial aid office.

Tuition	\$
Mandatory Fees	\$
Room & Board (on-campus housing only)	\$
Books	\$
Supplies	\$
Total Anticipated Educational Expenses	\$

ANTICIPATED STUDENT RESOURCES

Please list any scholarships or grants you have been awarded or are pending for 2025-2026 and the amount of each award. Please include Pell Grants or other federal aid, state aid, work-study, scholarships from your school, and other outside scholarships or awards.

Parental Contribution to Education	Amount Per Year \$
Student Contribution to Education	Amount Per Year \$

Scholarships	Amount Per Year	Status (Pending or Awarded)
1)	\$	
2)	\$	
3)	\$	
4)	\$	
5)	\$	
6)	\$	
7)	\$	
Total Scholarships	\$	

Grants	Amount Per Year	Status (Pending or Awarded)
1)	\$	
2)	\$	
3)	\$	
4)	\$	
5)	\$	
6)	\$	
7)	\$	
Total Grants	\$	

Loans	Amount Per Year	Status (Pending or Awarded)
1)	\$	
2)	\$	
3)	\$	
4)	\$	
5)	\$	
6)	\$	
7)	\$	
Total Loans	\$	

Copies of all financial aid letters must be included with the application.

FINANCIAL STATUS

Family Assets	Total balance in cash, savings &	
	checking	\$
	Net worth (value minus debt) of	
	investments, including real estate:	
		\$
	Other Sources of Income (Specify)	
	Total Assets:	\$

Family Gross Annual Income	Father:	\$
	Mother:	\$
	Student:	\$
	Total Annual Income:	\$

Number of households supported by gross income:	
Number of dependents supported by gross income:	
Number of siblings attending college next year:	

Please provide in annual dollar amounts estimated expenses:

Family Expenses	Costs
Mortgage or rent	\$
Medical Expenses (not paid by insurer)	\$
Childcare/Day Care	\$
Other Expenses	\$
Total Family Expenses	

Did you complete the Free Application for Federal Student Aid (FAFSA)? If so, what is your Student Aid Index (SAI)? \$_____

(Optional) You may use the space below to explain any compelling circumstances or factors, which you feel warrant special attention to include unusual personal, family, or financial circumstances or challenges.

APPLICANT RESUME

AWARDS AND HONORS

In order of importance to you, list awards and honors you have received during the past four years and briefly explain their significance. **No attachments please.**

Awards/Honors	Significance	Date Received

SCHOOL ACTIVITIES

<u>In order of involvement/importance to you</u>, please list the <u>top five</u> extra-curricular activities you have participated in during the past four years of high school, e.g., clubs, student government, national honor society, sports, music, drama, etc. **No attachments please.**

Activity	Grade(s)	Honors and/or positions held	Hours	Reference/Telephone
	and dates of	 – <u>Circle either elected (E) or</u> 	Per	
	participation	appointed (A)	Month	
1)		E/A		
2)		E/A		
3)		E/A		
4)		E/A		
5)		E/A		

COMMUNITY AND VOLUNTEER INVOLVEMENT

<u>In order of involvement/importance to you</u>, please list the <u>top five</u> community or volunteer extra-curricular activities you have participated in during the past four years of high school, e.g., nonprofit organizations, scouts, 4-H, and religious activities. **No attachments please.**

Activity	Grade(s)	Honors and/or	Hours Per	Reference/Telephone
	and/or dates	positions held – <u>Circle</u>	Month	
	of	either elected (E) or		
	participation	appointed (A)		
1)		E/A		
2)		E/A		
3)		E/A		
4)		E/A		
5)		E/A		

WORK EXPERIENCE

List your <u>paid</u> work experience during the past four years, beginning with your most recent position.

Employer	Nature of Work	Dates	Hours Per Week	Reference/Telephone
1)				
2)				
3)				
4)				
5)				

ESSAY - REQUIRED

ATTACHMENT SHOULD BE TYPED OR PRINTED NEATLY IN INK. PLEASE INCLUDE STUDENT NAME.

IN NO MORE THAN TWO DOUBLE SPACED PAGES, looking forward please describe your personal aspirations and career goals. Describe within these pages the importance scholarship assistance would have in meeting these goals. What factors did you consider when selecting the college/university you will attend?

REQUIRED SIGNATURES

I declare that I have met the eligibility requirements for the scholarship program(s) indicated on the first page of this application form. I further declare that all statements made on this application form or in conjunction with this application form are my own and are accurate and true.

udent's Signature:	
Da	ate
student is under 18 years of age:	
arent's/Guardian's Signature	
Da	ate
necklist: Please submit the following below in order with NO STAPLES: Application Essay	
 High school transcript (with raised seal) provided by your high school guidance counselor or other sch applicant's standardized test scores. One (1) letter of recommendation that you believe will strengthen your application. 	-
College acceptance and financial aid award letters. Documents must state the estimated cost per yea institution and the details of the financial aid package offered by the institution.	ar of attending the
FAFSA Student Aid Report (SAR). You can print a copy of your SAR by visiting the FAFSA website at fa account.	fsa.ed.gov/logging into your
eadline: All applications must be complete and postmarked no later than <u>April 1st</u> . Or oplications (consisting of this application form and all the supplemental materials listed onsidered by the selection committee.	
lail this application and all required supplemental materials to:	

Community Foundation of New Jersey Colleen Smith - Scholarship Services Post Office Box 338 Morristown, New Jersey 07963-0338

For further information please contact: Scholarship Services at 973.267.5502 or via email at csmith@cfnj.org.