

Zonta Club of Trenton/Mercer
P.O. Box 5488
Trenton, NJ 08638-0488
Chartered April 25, 1931
District 3, Area 2, Club # 112
www.zontatrenton.org

GRACE BRAUNINGER SCHOLARSHIP GUIDELINES AND CRITERIA

1. Full or part time student
2. Female
3. 21 years or older; a returning adult student going back to school after a break of more than a year.
4. Resident of Mercer County and attending a school in the State of New Jersey
5. Matriculated in:
 - Degree or certificate program with a minimum successful enrollment of one semester in that program.
 - Professional School of Nursing with a minimum of one year completed; or
 - Graduate Program.
6. Please provide the following documentation:
 - Application
 - Verification of current school enrollment
 - Financial Aid form

APPLICATION MUST BE RECEIVED BY JUNE 15

Email:

zontatrentonmercergmail.com

**Grace Brauninger Scholarship Committee
Zonta Club of Trenton/Mercer
P.O. Box 5488
Trenton, NJ 08638-0488**

**PAYMENT OF THE SCHOLARSHIP AWARD WILL BE MADE DIRECTLY
TO THE APPLICANT, NOT TO THE SCHOOL.**

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GRACE BRAUNINGER SCHOLARSHIP APPLICATION

This application is designed to collect information about your background, financial need and future plans. Your responses are confidential. The selection of scholarship recipients will be influenced by the completeness of replies.

PLEASE TYPE OR PRINT

Name: _____

Permanent Address: _____

(Street)

(City, State and Zip Code)

Email Address: _____

Telephone: (_____) _____ Date of Birth: _____ Age: _____

Academic Institution Currently Attending: _____

Enrollment Status During Academic Year of 2022-2023: Full Time Part Time

Highest Level of Education Completed: _____ Credits:

Currently Working Towards: _____ Degree: _____

Major Field of Study: _____

Intended Career: _____

Cumulative Grade Point Average: _____

EMPLOYMENT HISTORY:

List below in order (most recent first) the jobs you have held. Include part time jobs, volunteer positions, and military service.

Employer/Location	Job Title/Function	From-To
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

COMMUNITY INVOLVEMENT/ACTIVITIES: _____

FAMILY AND FINANCIAL INFORMATION:

1. Number of Members in Household (include yourself): _____
2. Number of Household Members currently attending college: _____
3. Number of Household members under age 18: _____
4. Number of Wage earners in the household: _____
5. Total Taxable Household Income: _____
6. Estimated total cost of YOUR current year's college expenses: _____
(e.g. include tuition, fees, books, room/board, if applicable, etc.)
7. Other financial assistance you are/will be receiving:
\$ _____ Grants \$ _____ Financial Aid
\$ _____ Loans \$ _____ Other Scholarships

8. Describe any special circumstances in addition to the information already supplied, which explains why you are seeking this financial assistance. (Attach a separate sheet if necessary).

9. List any scholastic awards and honors:

List any other awards/recognitions:

Are you available for an interview? : _____

In the space provided, describe your current and future goals and how this scholarship would help you achieve them.

10. **In the event of award**, the applicant agrees to submit social media tags and a photograph for promotion to the public, on its website and within Zonta International. ZCTM agrees that it will not use any of this information for any other purpose. The applicant also agrees to attend at least one Zonta Club of Trenton/Mercer Business meeting to discuss the award and future plans.

CERTIFICATION: All of the information on this form is true and complete to the best of my knowledge.

Signed: _____ Date: _____