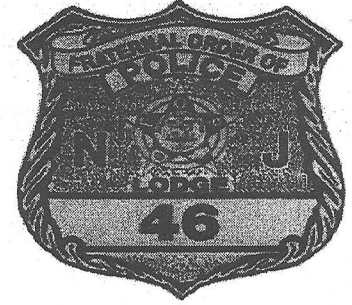




FRATERNAL ORDER OF POLICE
 NEW JERSEY LODGE #46. INC.
 PO BOX #346
 ROCHELLE PARK,
 NEW JERSEY 07662



APPLICATION FOR LODGE SCHOLARSHIP

Applicant's Full Name:	Scholarship Year: 2024
DEBBIE BASIC MEMORIAL SCHOLARSHIP	

This Scholarship is dedicated to the memory of Debbie Basic, an FOP Lodge 46 Member. Debbie was an inspirational Psychologist, who counseled Law enforcement in the days, months and years following the "911" attack on the WTC. Debbie will always be remembered in Lodge 46."

APPLICATION INSTRUCTIONS - READ CAREFULLY BEFORE SUBMITTING

- The total amount of the Lodge Scholarship will be in a single, one-time payment of \$1,000 per recipient.
- Applications for a Lodge Scholarship are available from **February 1 through April 30**. All applications must be received by the Committee no later than **April 30, 2024** to be considered. Email submissions will not be accepted.
- Scholarships are only available to those applicants who are High School Seniors who are graduating during the year that the Scholarship is being applied for.
- The following are considered to be Eligible individuals in the following order:
 1. Children or Grand-children of Active Members in Good Standing of the Lodge
 2. Children or Grand-children of Associate Members in Good Standing of the Lodge
- All applicants are considered based upon:
 1. Academic Achievement
 2. Scholastic Merit
 3. Financial Need
 4. Applicant Life Stated Goals (see below regarding essay instructions)
 5. Lodge Membership Status/History of Applicant's Parents/Grand-parents
 6. Other factors as determined by the Committee.
- Applicant **MUST** submit **Transcripts** of grades from freshman year through 1st semester of senior year of high school with a minimum **unweighted* Grade Point Average (GPA) of 3.0 or more**. **"Unweighted" means that no additional courses (honor courses, additional or supplemental grade courses) will be considered in factoring the base GPA.*
- Applicants must submit and attach an written essay with a **200 word minimum** on what their life/career goals are, what college/university they have selected, what they wish to study, and why they wish to attend that college/university.
- **ONLY** this original application is to be submitted - **NO** photocopied applications may be submitted
- **ALL** questions on application must be completed. If any question is inapplicable "N/A" must be entered into the response area. Use separate sheet of paper to fully answer questions, if needed by referring to Question #.
- All Applications **MUST** be accompanied by the **required documentation**. Incomplete applications **WILL NOT** be considered.
- All questions must be answered truthfully and to the best of the applicant's knowledge and ability. Any false information, misstatement of fact, or omission of information are grounds for disqualification of the application being considered.
- Any questions or concerns should be addressed to the Scholarship Committee **PRIOR** to submission of the Application.
- For Questions, please contact the Scholarship office and leave a message at 201-280-3890



SECTION 1: APPLICANT INFORMATION

01. Full Name of Applicant (Including Middle Name & Suffix, if applicable)		
02. Applicant Street Address (Including Apt #, if applicable)		
03. City	04. State	05. Zip Code+4
06. Home Telephone		07. Cell Telephone
08. EMail Address:		
09. Do you have any Social Media accounts? <input type="checkbox"/> YES <input type="checkbox"/> NO	10. If YES, please list ALL sites you subscribe to: <input type="checkbox"/> Facebook <input type="checkbox"/> Twitter <input type="checkbox"/> Instagram <input type="checkbox"/> TikTok <input type="checkbox"/> SnapChat <input type="checkbox"/> YouTube <input type="checkbox"/> Other(s) (please list): _____	

SECTION 2. HIGH SCHOOL INFORMATION

11. Name of Current High School Attending:		12. Graduation Date:	13. Curriculum Level Being Studied:
14. School Street Address:			
15. City:	16. State:	17. Zip Code +4:	
18. Name of Current School Principal:		19. Contact Number:	20. EMail Address:
21. Name of Applicant's Guidance Counselor:		22. Contact Number:	23. EMail Address:
24. Do you participate in any extra-school activities? (Sports, Clubs, etc) <input type="checkbox"/> YES <input type="checkbox"/> NO		25. If YES, describe:	
26. Do you participate in any activities outside of school? (Community, Church, Non-School Sports, Clubs, etc.) <input type="checkbox"/> YES <input type="checkbox"/> NO		27. If YES, describe:	
28. Have you received any award/recognition from your School or Community? <input type="checkbox"/> YES <input type="checkbox"/> NO		29. If YES, describe:	
30. Do you hold, or have you held, any position of leadership in your School and/or Community? <input type="checkbox"/> YES <input type="checkbox"/> NO		31. If YES, describe:	

Application Continues on Next Page



SECTION 3. APPLICANT EMPLOYMENT INFORMATION

32. Are you currently employed? <input type="checkbox"/> YES <input type="checkbox"/> NO		33. If YES, Full or Part Time Employed: <input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME		34. Position / Title:	
35. Name of Employer:					
36. Address of Employer:					
37. If Part-time, No# of Hrs per wk:		38. Salary or Hourly Rate of Pay:		39. Name of Supervisor/Owner:	
40. Contact Number of Employer:					

SECTION 4. FAMILY INFORMATION

41. Mother's Full Name:					
42. Mother's Address (If Different than yours) <input type="checkbox"/> SAME ADDRESS AS MINE					
43. Is your Mother Employed?: <input type="checkbox"/> YES <input type="checkbox"/> NO		44. If YES, Name of Mother's Employer and position / title		44A. Mother's Gross (Before Tax) Annual Income:	
45. Address of Mother's Employer:				46. Telephone Number of Mother's Employer:	
47. Father's Full Name:					
48. Father's Address (If Different than yours) <input type="checkbox"/> SAME ADDRESS AS MINE					
49. Is your Father Employed?: <input type="checkbox"/> YES <input type="checkbox"/> NO		50. If YES, Name of Father's Employer and position / title		50A. Father's Gross (Before Tax) Annual Income:	
51. Address of Father's Employer:				52. Telephone Number of Father's Employer:	
53. Do you have any Siblings?: <input type="checkbox"/> YES <input type="checkbox"/> NO		54. If YES, How many Siblings:		55. Do any of your Siblings live with you?: <input type="checkbox"/> YES <input type="checkbox"/> NO No#: _____	
56. Please list all Siblings: (Use extra sheet, if necessary)					
a. Name:		Relationship:	Does this Sibling go to College?: <input type="checkbox"/> YES <input type="checkbox"/> NO		Name of college:
b. Name:		Relationship:	Does this Sibling go to College?: <input type="checkbox"/> YES <input type="checkbox"/> NO		Name of college:
c. Name:		Relationship:	Does this Sibling go to College?: <input type="checkbox"/> YES <input type="checkbox"/> NO		Name of college:

Application Continues on Next Page



SECTION 5. QUALIFYING F.O.P.® MEMBERSHIP & INCOME INFORMATION

All information submitted here will be held as confidential and will not be disclosed

57. Full Name of F.O.P.® Lodge No.46 Member:		58. Relationship to Applicant:	
59. Member is an: <input type="checkbox"/> ACTIVE (LEO) <input type="checkbox"/> ASSOCIATE	60. Membership Number:	61. Member hold Lodge Office?: <input type="checkbox"/> YES <input type="checkbox"/> NO	62. If YES, Lodge Title:
63. Combined Gross (Before Tax) Annual Family Income of Member			
64. Domicile Type: <input type="checkbox"/> Home <input type="checkbox"/> Condo/Co-Op <input type="checkbox"/> Apartment		65. Residence : <input type="checkbox"/> Own <input type="checkbox"/> Rent	
66. Monthly Payment:			

SECTION 6. FINANCIAL AID & COLLEGE *(Use extra sheet if necessary)*

67. Has Applicant Applied for Any Financial Aid?: <input type="checkbox"/> YES <input type="checkbox"/> NO	68. Applicant's Primary Choice for College:	69. Accepted?: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> PENDING
70. List All Financial Assistance Applicant has Applied for (Use extra sheets if necessary):		
a. Name of Financial Institution:	Type of Financial Assistance Requested:	Request Status: <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED <input type="checkbox"/> PENDING
b. Name of Financial Institution:	Type of Financial Assistance Requested:	Request Status: <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED <input type="checkbox"/> PENDING
c. Name of Financial Institution:	Type of Financial Assistance Requested:	Request Status: <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED <input type="checkbox"/> PENDING
71. List All Colleges Applicant has Applied to (Use extra sheets if necessary):		
a. Name of College:	Location:	Application Status:
b. Name of College:	Location:	Application Status:

SECTION 7. CERTIFICATION & APPLICATION

<p>Parent/Grand-Parent Member: I hereby certify that I am a member in good standing of Fraternal Order of Police®, New Jersey Lodge No. 46, Inc. and do hereby sponsor the applicant named herein, who is my child/grand-child for the scholarship/grant named herein.</p> <p>I certify that I have reviewed this application with my child/grand-child and that all of the information contained in this application is true, accurate and complete to the best of my knowledge.</p> <p>I also understand that this application is subject to rejection if it is not complete, all required documentation is not provided, the application has been submitted past the required deadline for submission, or if there is any purposeful falsification or omission of information submitted on this application.</p>	<p>Scholarship Applicant: I hereby certify that I am the applicant named herein and do request the consideration of Fraternal Order of Police®, New Jersey Lodge No. 46, Inc. in granting this scholarship/grant as named in this application.</p> <p>I certify that all of the information submitted in this application is true, accurate, and complete to the best of my knowledge and ability, and that I have attached all of the documentation which is required in submitting this application.</p> <p>I fully understand that this application is subject to rejection if it is not complete, all required documentation is not provided, the application has been submitted past the required deadline for submission, or if there is any purposeful falsification or omission of information submitted on this application</p>
Signature of Parent/Grand-Parent/Member: X	Signature of Applicant: X



SCHOLARSHIP APPLICATION CHECKLIST

- Both Applicant and eligible Parent/Grand-Parent/Member have fully read the instructions of this application and understand all of the requirements
- Application is fully completed, dated and signed by both applicant and parent or grand-parent member of the Lodge,
- Application has been reviewed by both applicant and eligible Parent/Grand-Parent/Member to ensure that all required information is contained in the application. That all questions have been answered. That any additional information requested that could not be entered into the space provided has been put on a separate sheet of paper with the question number included.
- School transcripts for applicant's grades from freshman year through 1st semester of senior year of high school are attached to application.
- Applicant's minimum 200 word essay on their life/career goals, what college/university they have selected, what they wish to study, and why they wish to attend that college/university is attached to this application.
- Photocopies of the current F.O.P. Lodge #46 membership card of the eligible parent/grand-parent/member sponsoring the application is attached to this application.
- Application is submitted before stated deadline of May 1st.
- Application and documentation is to be submitted to:

**FRATERNAL ORDER OF POLICE
NEW JERSEY LODGE No. 46, INC.
P.O. Box 346, Rochelle Park,
New Jersey 07662-0346
ATTN: SCHOLARSHIP COMMITTEE**

**For Questions, please contact the
Scholarship office and leave a
message at 201-280-3890**