

**New Jersey Federation of Dog Clubs, Inc.**  
**Scholarship Application**  
(please print or type)

**NAME** \_\_\_\_\_ **AGE** \_\_\_\_\_ **SEX** \_\_\_\_\_

**PRESENT ADDRESS** \_\_\_\_\_

**PRESENT TELEPHONE** \_\_\_\_\_

**HOME ADDRESS** \_\_\_\_\_

**HOME TELEPHONE** \_\_\_\_\_ **EMAIL** \_\_\_\_\_

**PARENTAL INFORMATION:**

\_\_\_\_\_ **NAME** \_\_\_\_\_ **ADDRESS** \_\_\_\_\_ **TELEPHONE** \_\_\_\_\_

**FATHER** \_\_\_\_\_

**MOTHER** \_\_\_\_\_

**EDUCATION:**

**HIGH SCHOOL** \_\_\_\_\_ **YEAR GRADUATED** \_\_\_\_\_

**COLLEGE** \_\_\_\_\_ **YEARS COMPLETED** \_\_\_\_\_

**GRADUATE SCHOOL** \_\_\_\_\_ **YEARS COMPLETED** \_\_\_\_\_

**PRESENT SCHOOL 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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**APPLICANTS INCOME INFORMATION:**

YEARLY SALARY \_\_\_\_\_ OTHER SOURCES \_\_\_\_\_

HOW HAS APPLICANT FINANCED EDUCATION TO DATE

COLLEGE \_\_\_\_\_

GRADUATE SCHOOL \_\_\_\_\_

VETERINARY SCHOOL \_\_\_\_\_

**TYPE OF VETERINARY PRACTICE PLANNED AFTER GRADUATION & LOCATION**

**WHY DOES THE APPLICANT NEED AND DESIRE THIS SCHOLARSHIP?**

Note: To apply for the scholarship, send the following items to the Scholarship Committee Chairman at 735 Park Avenue, Collingswood, NJ 08108-3145:

- 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 Administration, Faculty, Veterinarians, etc.). The personal reference should not be from members of the applicant's family.