

September 2016

Dear Applicant:

As requested, enclosed please find the George H. Laufenberg scholarship application form and the necessary data sheets for a teacher, guidance counselor and personal reference. ALL forms are necessary and must be completed and submitted by April 1, 2017. Please be sure that you or your guidance counselor submits a copy of your SAT scores and high school transcript. Scholarships will not be awarded on incomplete applications.

Please read the application and eligibility rules and requirements carefully, and return your completed application to the George H. Laufenberg Scholarship Fund, Raritan Plaza II, P.O. Box 7818, Edison, New Jersey 08818-7818.

*It is your responsibility to make sure that your completed application is received by the Fund Office. If you are unsure whether all of the required documents were submitted on your behalf, or you have any questions concerning the enclosed information, please contact the Scholarship Fund at 732-417-3900 Ext. 322.*

Very truly yours,



George R. Laufenberg  
President

GRL/lr  
Encls.

**SCHOLARSHIP APPLICATION FORM**

Please complete this form and all data sheets accurately and in their entirety. Mail to: George H. Laufenberg Scholarship Fund, Raritan Plaza II, P.O. Box 7818, Edison, New Jersey 08818-7818 by **4/1/2017**. For further information, please call 732-417-3900 ext. 322.

NAME \_\_\_\_\_  
Last First Middle  
ADDRESS \_\_\_\_\_  
Number & Street City State Zip  
TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ BIRTH DATE \_\_\_\_\_  
E-MAIL ADDRESS \_\_\_\_\_

NAME OF PARENT/LEGAL GUARDIAN/GRANDPARENT WHO IS A MEMBER OF A CARPENTERS LOCAL, AND THEIR SOCIAL SECURITY OR UBC ID NUMBER:  
\_\_\_\_\_

MEMBER'S LOCAL UNION # \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(If different than above)

LIST COLLEGES TO WHICH YOU HAVE APPLIED IN ORDER OF PREFERENCE:

COLLEGE/UNIVERSITY	ADDRESS	ACCEPTANCE REC'D
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Last Secondary School Attended Address

Name of Guidance Counselor Name of One Teacher

ACTIVITIES AND HONORS (Academic, Extra Curricular, Community)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WORK EXPERIENCE (IF ANY)  
\_\_\_\_\_  
\_\_\_\_\_

**Please enclose on a separate sheet of paper a brief description of relevant experiences or concepts that have helped shape your life to date, your reasons for wanting to continue your education, and any goals you have set for yourself. Also, include some mention of how the carpenters union has impacted your life.**

George H. Laufenberg Scholarship Fund  
Raritan Plaza II  
P.O. Box 7818  
Edison, NJ 08818-7818

**CONFIDENTIAL DATA SHEET**

**(GUIDANCE COUNSELOR)**

NAME OF STUDENT \_\_\_\_\_

NAME OF EVALUATOR \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

The student named above is applying for a scholarship being offered by the George H. Laufenberg Scholarship Fund. Your evaluation is important to us in considering this applicant.

**EVALUATION OF SOCIAL AND PERSONAL CHARACTERISTICS**

	Superior	Above Average	Average	Below Average
Dependability				
Initiative				
Leadership				
Maturity				

Please add any impressions you have regarding this student's ability to succeed in the college program of his/her choice, as well as any other information you may offer relating to your evaluation of this student. **Please be sure to enclose a copy of his/her SAT scores and transcript.**

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\_\_\_\_\_

Rank in Class \_\_\_\_\_



