



## Elizabeth A. Allen & Isabelle M. Hickman 4-year College Scholarship Awards for 2024

**Students who apply for a four-year scholarship will automatically be considered for both scholarships.**

1. Each award is for \$1,500 for one year (renewable for one consecutive year in college/university) to a student who:
  - a. Will graduate from a New Jersey public high school this year, including vocational-technical and public charter schools.
  - b. Has a cumulative grade point average (GPA) of 3.75 or higher.
  - c. Has been accepted to a 4-year college/university.
2. The applicant must submit two (2) copies of the completed items, a through f, each stapled as a set:
  - a. The completed 2024 scholarship application form.
  - b. A high school transcript.
  - c. A brief essay illuminating your goals and interests for college and beyond; typed, double-spaced in a 14 pt. font; not to exceed 2 pages or 500 words. **(This statement is very important, as a number of applicants are often equal academically.)**
  - d. A list of extra-curricular activities, athletics, honors, community services, and employment, using the form provided.
  - e. Two letters of recommendation, at least one of which is from a teacher at the high school.
  - f. School profile provided by the Guidance Counselor.
3. **All information must be postmarked on or before February 28, 2024.**  
**NOTE:** A student may apply for only one (1) NJREA Scholarship (Allen/Hickman, Aug, or Krichling).
4. A recipient who has maintained a college GPA of at least 3.0 may apply for a renewal of the scholarship for one consecutive year. A transcript from the college and a personal report of the year's activities and verification of payment are required.
5. **Mail to:**  
NJREA Allen/Hickman Scholarship  
PO Box 1211  
Trenton, New Jersey 08607-1211



# Elizabeth A. Allen & Isabelle M. Hickman 4-year College Scholarship Awards for 2024

Applicant's name \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ County: \_\_\_\_\_  
City / State / Zip: \_\_\_\_\_ Applicant's Cell #: (\_\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
SAT Scores: R: \_\_\_\_\_ M: \_\_\_\_\_ ACT Scores: \_\_\_\_\_

### Father (or guardian)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City / State / Zip: \_\_\_\_\_  
Phone (\_\_\_\_\_) \_\_\_\_\_

### Mother (or guardian)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City / State / Zip: \_\_\_\_\_  
Phone (\_\_\_\_\_) \_\_\_\_\_

### Colleges & universities applied to:

	Accepted:
1. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Will attend: \_\_\_\_\_  
Annual Tuition: \$ \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone (\_\_\_\_\_) \_\_\_\_\_  
Your career choice: \_\_\_\_\_

By submitting this application, I certify that I am the person who wrote and edited this material.

\_\_\_\_\_  
Signature

**Send this form - along with all of the required information - by February 28, 2024 to:**

NJREA Allen/Hickman Scholarship  
PO Box 1211, Trenton, New Jersey 08607-1211

2209 – 10/16/2023

# Scholarship Activity Sheet

NAME LAST:	FIRST:	MIDDLE:
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## AWARDS & HONORS

AWARD	GRADES INVOLVED	REASON FOR AWARD
<b>Example:</b> Principal's Honor Roll	9 10, 11, 12	GPA of 3.5 or above

## ATHLETICS

TEAM	GRADES INVOLVED	POSITION / LEADERSHIP ROLE
<b>Example:</b> Soccer	9 10, 11, 12	Grade 9 – Team Member; Grade 10 - Team Captain

## EXTRA-CURRICULAR ACTIVITIES: Any involvement with clubs/organizations (in or out of school)

ORGANIZATION / CLUB	GRADES INVOLVED	POSITION / LEADERSHIP ROLE
<b>Example:</b> Spanish Club	9 10, 11, 12	Secretary

This form may be duplicated.

# Scholarship Activity Sheet

NAME LAST:	FIRST:	MIDDLE:	
<b>COMMUNITY SERVICE</b>			
JOB / VOLUNTEER	GRADES INVOLVED	NAME OF ESTABLISHMENT	DESCRIPTION
<i>Example:</i> Volunteer	9 10, 11, 12	Local Public Library	Garden Clean-up
<b>WORK EXPERIENCE</b>			
EMPLOYER	GRADES INVOLVED	JOB TITLE / POSITION	DUTIES
<i>Example:</i> Staples	9 10, 11, 12	Sales Associate	Assist customers locating purchases and check-out

This form may be duplicated.

<b>The above information is true and accurate to the best of my knowledge.</b>	
Signature	Date