HAROLD B. & DOROTHY A. SNYDER FOUNDATION

P.O. Box 169

Silver Spring, PA 17575-0169

SCHOLARSHIP APPLICATION

Mission of the Snyder Foundation: The Snyder Foundation awards college scholarships in designated fields in higher education only at specific NJ colleges for specific majors and makes grants to other worthwhile, tax-exempt organizations.

The Snyder Foundation provides financial assistance as scholarships to Junior, Senior and Graduate students in specific majors and career fields including:

At NJIT: Bachelor's degree in Construction Management Technology, Construction Engineering Technology or Civil Engineering; Master's degree in Civil Engineering, Architecture, Construction Management or Construction Engineering

At Seton Hall and St. Elizabeth University: BSN, Nursing

scholarship eligibility.

Remember to include the following with this application:

At Kean University: Special Education, Early Childhood Education; BSN, Nursing for graduates from the JFK-Muhlenberg Snyder School of Nursing in Plainfield, NJ

Seminary: Bachelors or Masters in Ministry and Theology with a NJ-area connection.

Scholarships are need-based and available in amounts up to \$5,000 per academic year (up to \$2,500 per semester) for full-time 3rd year, 4th year and graduate students for up to a maximum of four semesters. Applications must be submitted through your school and may not directly be submitted to the Foundation, except for seminarians.

Eligibility Requirements: you are encouraged to apply if you satisfy the following:

- You must demonstrate financial need and provide your school's financial aid report.
- You must have and maintain a minimum cumulative 3.0 GPA throughout the period of assistance.
- You must be a (i) U.S. citizen, or a (ii) U.S. national, or a (iii) U.S. permanent resident, or an (iv) eligible non-citizen with a valid I-94 showing that you are on a
 T-visa or other qualified status under Title IV federal financial aid regulations detailed by your Office of Financial Aid. In the case of those relying on a status described in preceding clauses (ii), (iii) or (iv), you must also have held that status for at least one year prior to the semester of
- You must be a person of exemplary character who exhibits honesty and integrity while
 possessing a sense of purpose and a history of personal accountability and responsibility to
 others.
- You must be enrolled as a full-time student at a designated college listed above and you must be entering your junior or senior year in college or pursuing a graduate degree in one of the designated fields listed above.

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This fully completed application	Current & previous years' Official Award letters
Estimated Financial Contribution letter	Transcripts from current & previous colleges
Two letters of recommendation	Other attachments as necessary

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SCHOLARSHIP APPLICATION

Full Name		Pr	Phone Major		
		N			
Permanent Address_					
	Street		City	State	Zip
Mailing Address at C	ollege				
Date of Birth	y year (yyyy) and Place	of Birth	ity/county and state/country)		
Are you (check one): U.S. Citiz					itizen
Check one:					
not independent, and o	old" includes yourself, you other people who currently your parents. Your parer	ly live with your pa	arents', each who	receive more	e than
who currently live with	nold" includes yourself (a you, each for which you լ h Dec. 31, 2023. You ar	provided more tha	n half of their supp	oort betweer	i .
If you are <i>independent</i> , comparents, etc.):	nplete the remaining info	rmation on this pa	ge <u>only</u> for <u>your</u> h	ousehold (ex	clude
How many people are in yo your/your parents' income?		old and receive mo	ore than half of the	eir support fr	om
Please provide the full nam First Name	e, age, and relationship t <u>Last Name</u>	to you for each ho <u>Age</u>	usehold member, Relationship	•	
If you have a household mer being applied for, including the					
1. Last Name	First Name		Part time or I	-ull time	
College or University		Birth Date: m	m/dd/yyyy		
2. Last Name		First Name	Part time or Fu	II time	
College or University		Birth Date: m	m/dd/yyyy		

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FINANCIAL AID INFORMATION

A copy of your current year AND previous year Official Award letter or other verification of all current Financial Aid (scholarships, grants, loans) from the Office of Financial Aid must be sent with this application. Attach a copy of your latest Estimated Financial Contribution (EFC) and FAFSA (pg 1 only); please redact or black-out your Social Security Number and other confidential information on these forms; your SSN is not required to consider your application.

In addition, if you have received an Official Award letter for the upcoming academic year, a copy of that must also accompany this application.

School Expenses and Financial Aid	(estimated <u>annual</u> expenses a	and <u>annual</u> financial support):		
Annual tuition cost: \$	Annual room & board expenses: \$ Annual commuting expenses: \$			
Books/fees/other expenses: \$				
Miscellaneous expenses (annual): \$ _	Total Annual Expenses: \$			
Amount you pay: \$ A	mount contributed by others: \$	EFC: \$		
Financial Aid: Loans: \$	_ Scholarships/grants: \$	Other: \$		
If you have extenuating financia	al circumstances, please explain	on no more than 1 page.		
Have you ever been placed on disciplinar disciplinary reason from any institution? Have you ever been convicted of or plead If yes, please provide the offense date, lo	Yes No diguilty or no contest to a felony?	Yes No		
Employer Position	From: M/YY T	o: M/YY Hrs/Wk Pay Rate		
EXTRACURRICULAR ACTIVITIES (a school and community activities in wh student government, clubs, volunteer)	iich you have participated this y projects, etc.) Please include th	ear and last year-i.e., athletics,		
participation and any offices held or he	onors given.			

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work from your curren	·		•	completed academic
Cumulative GPA:				
Expected Graduation Date	te (mm/yyyy)			
If Transferred, From:	College/University	Vocational	Seminary	Community College
Schools:				
I have completed	hours of cours	e credit as of		(date, e.g 12/31/23)
I am currently taking	hours	s of course cred	it perser	mesteryear
Minimum number of cou	rse credit hours neede	ed for my degree	<u> </u>	
I am currently classified	as a/an :			
I will be classified in the	upcoming school year	r as a:		
I have the following degr	ees/licenses (include	date received ar	nd from which	schools):
List awards, scholarsh descending order of si		special recog	nitions you h	ave received, in
Describe one specific	example of your lead	dership.		
What are the three mos	st significant course	s you have tak	en in prepara	ation for your career?
1.				
•				
•				
In the space below, ple Do you think voluntary			If so, why?	If not, why?

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How did you learn about the Harold B. & Dorothy A. Snyder Scholarship?
How would you respond to this statement from the Charter of the Snyder Foundation, suggesting that recipients of this scholarship pay it forward once they are able to make contributions and/or provide time as a mentor to other students?
What do you hope to do and what position do you hope to obtain upon completing your degree?
LETTERS OF RECOMMENDATION: Please attach 2 letters of recommendation from either previous professors you have taken a class with, your academic advisor or professors you have worked with. List the name and position of the persons providing your letters of recommendation: Letter of recommendation 1 from:
Letter of recommendation 2 from:AUTHORIZATIONS:
By signing this application form, I hereby authorize the college/university I attend to release copies of my transcripts, my education records and information on financial aid awarded to me by the college and other sources to the Harold B. & Dorothy A. Snyder Foundation. I/We certify that all information submitted as part of this application is true and correct and that any scholarship awarded is subject to being paid back if any of the information is found to be inaccurate. Applicant's Name (please print)
Applicant's Signature (required)
Date
Parent/Legal Guardian Signature (if applicable)
Date Note: Please save this form and forward it to the proper parties as appropriate or necessary
Note. Flease save this form and forward it to the proper parties as appropriate of necessary

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