

Franklin Township Chamber of Commerce (FTCC) Scholarship
2024-25 School Year Application Form

Deadline: Thursday, May 15, 2025, at 11:59 PM, no exceptions.

Requirements:

- Students **must** be a graduating high school senior who currently lives in and attends an accredited high school located in Franklin Township, NJ.
- Students **must** be enrolled at a college, university, technical school, or vocational school by the Fall of 2025.
- Students **must have one** of the following unweighted GPAs and volunteer/community service hours indicated on their sealed or secured electronic transcripts:
 - Attending a **College/University** must have a 3.0 unweighted GPA and 50 volunteer/community service hours completed.
 - Attending a **Vocational/Technical School** must have a 2.0 unweighted GPA and 25 volunteer/community service hours completed.

Instructions: Please complete all sections of this application thoroughly and accurately. Incomplete applications will not be considered. Please type or print clearly in black ink.

Section I: Applicant Information

1. **Full Legal Name:** (Last, First, Middle)

2. **Preferred Name (if different):**

3. **Date of Birth (MM/DD/YYYY):** _____
4. **Gender Identity:** ☐ Female ☐ Male ☐ Non-binary ☐ Prefer not to say
5. **Current Address:** _____
City: _____ State: _____ Zip Code: _____
6. **Phone Number:** _____
7. **Email Address:** _____

Section II: Academic Background

8. **High School Name:** _____
9. **High School Address:** _____
City: _____ State: _____ Zip Code: _____
10. **Expected Graduation Date (MM/YYYY):** _____

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11. **Current Cumulative Grade Point Average (GPA):** (Unweighted) _____

Please send a sealed or secured electronic official high school transcript to the physical or email addresses provided on the checklist.

12. **Current Volunteer/Community Service Hours:** _____

13. **If applicable, list any Advanced Placement (AP), International Baccalaureate (IB), or Dual Enrollment courses you are currently taking or have completed:**

Section III: Extracurricular Activities, Leadership, and Community Involvement

15. **Please list and briefly describe your extracurricular activities, including clubs, sports, arts, and other interests. Indicate any leadership roles held and the years of participation.**

| Activity/Organization | Role(s) Held | Years of Participation | Brief Description of Involvement and Achievements |

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16. **Briefly describe your involvement in community service or volunteer activities. Include the organization, your role, duration, and the impact of your contributions.**

17. **List any significant awards, honors, or recognitions you have received:**

Section IV: College/University, Technical/Vocational School Plans

18. **List the colleges, universities, technical or vocational school(s) you are applying to or have been accepted into (in order of preference if you have a choice):**

1.

2.

3.

19. **Intended Major, Area or Field of Study:**

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Section V: Video Response Prompt

20. Please respond to the following prompt below in a well-thought-out video response. You can use your phone, laptop, or computer to record your answer. **Your response cannot exceed two minutes. Please email your video to the email address provided on the checklist by 11:59 PM, Thursday, May 15, 2025.** Submissions made after the listed date and time will not be accepted.

Considering the core responsibilities and potential advancements within your career field of choice, how do you envision your work and the broader adoption of this career impacting the landscape of future business commerce? Specifically, discuss at least two significant ways this career path could create new commercial opportunities, disrupt existing business models, or fundamentally reshape how goods, services, or information are exchanged and valued.

Section VII: Student Recommendation Form

25. Please provide the names and contact information (email and phone number) of two individuals submitting letters of recommendation on your behalf. At least one recommendation should be from a teacher or counselor who knows you well academically. Recommenders should submit their forms by the deadline for applications.

Recommender 1:

- Name: _____
- Title: _____
- Email: _____
- Phone Number: _____

Recommender 2:

- Name: _____
- Title: _____
- Email: _____
- Phone Number: _____

Applicants are responsible for following up with and confirming that recommenders have submitted their recommendation forms by the deadline.

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Section VIII: Certification and Submission

By signing below, I certify that all information provided in this application is accurate and complete to the best of my knowledge. I understand that providing false or misleading information may result in the disqualification of my application or the revocation of any scholarship I have been awarded.

Applicant Signature: _____ **Date:** _____

Parent/Guardian Signature (if the applicant is under 18):

_____ **Date:** _____

Please submit the completed application form and your video response to the addresses provided on the checklist.

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Checklist of Required Materials

- ☐ Completed Application Form
- ☐ Official High School Transcript
 - If mailing, please send the sealed transcript to: **Franklin Township Chamber of Commerce, Post Office Box 5014, Somerset, NJ 08875**
 - If sending secured electronic transcripts, send to:
franklinnjchamber@gmail.com
- ☐ Video Response Prompt
 - Email to: **franklinnjchamber@gmail.com**
- ☐ Student Recommendation Form **(to be submitted separately by recommenders)**
 - See instructions on the attached Student Recommendation Form

Thank you for your interest in the FTCC Scholarship!

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STUDENT RECOMMENDATION FORM

DUE BEFORE OR ON Thursday, 15, 2025, at 11:59 PM

Applicant Information:

- Student's Full Name: _____
- Applicant's Date of Birth: _____
- Applicant's Grade Level: _____
- Applicant's Email Address: _____

Recommender Information:

- Recommender's Full Name: _____
- Recommender's Title/Position: _____
- Recommender's Institution/Organization: _____
- Recommender's Email Address: _____
- Recommender's Phone Number: _____
- How long have you known the applicant and in what capacity?

Instructions for Recommender:

Thank you for taking the time to recommend this student. Your honest and thoughtful assessment is greatly appreciated. Please provide specific examples and anecdotes whenever possible to support your ratings and comments.

- Please complete all sections of this form.
- You can attach an additional letter of recommendation if you would like to provide more detailed information.
- Please submit this form and any accompanying letter by the deadline indicated above to:
 - ☐ Electronically to: **franklinnjchamber@gmail.com**
 - ☐ By Mail to: **Franklin Township Chamber of Commerce, Post Office Box 5014, Somerset, NJ 08875**

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Section I: Evaluation of Qualities

Please rate the applicant in comparison to other students you have known at a similar level.

Quality	Below Average	Average	Good	Very Good	Excellent	Unable to Evaluate
Academic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effort and Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills (Written)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills (Oral)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative and Independence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility and Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respectfulness and Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Section II: Narrative Comments

Please provide specific examples and anecdotes to elaborate on the applicant's strengths and areas for growth in the following areas. You may use the space provided below and/or attach an additional letter.

1. Academic Abilities and Intellectual Curiosity:

2. Effort, Perseverance, and Critical Thinking Skills:

3. Communication Skills, Leadership Potential, and Teamwork Skills:

4. Initiative, Independence, Responsibility, and Respectfulness:

5. Overall impression of the applicant and their potential for success in the program/opportunity they are pursuing:

Section III: Recommendation

Based on your knowledge of the applicant, how strongly do you recommend them for this program/opportunity?

☐ **Not Recommended**

☐ **Recommended with Reservations (Please explain below):**

☐ **Recommended**

☐ **Strongly Recommended**

Recommender Signature: _____

Date: _____

Thank you again for your time and valuable insights.