

Diane Dellanno Scholarship Instruction Page

Funded by the New Jersey Department of Children and Families

Scholarship Eligibility Criteria: Students applying for the Diane Dellanno Scholarship are expected to meet the following criteria:

- Applicants must demonstrate a commitment to passionately pursuing a career in the helping profession (social worker, teacher, counselor, nurse, etc.)
- Be a graduating senior at a participating Parent Linking Program
- Has 75% participation rate or higher in Group Sessions
- Have an average GPA of 3.0 (B) or better in their senior year
- Be accepted to a community college, university or higher education program
- Must be present at the Teen Conference to receive the scholarship

Application Instructions:

- Complete the Diane Dellanno Scholarship Application
- Submit an official high school transcript NOT report card
- Submit a "Letter of Recommendation" from a teacher or guidance counselor in a sealed envelope. You must inform the person completing your letter of recommendation to include the following:
 - ✓ Describe your character
 - ✓ Describe your commitment to educational pursuits
 - ✓ Why he/she believes you are deserving of the scholarship
- Submit a college acceptance letter from the school you will attend
- Complete an essay choosing ONE of the topics below. Essays should be a minimum of 1 page in length (maximum of 3 pages) double-spaced, Times New Roman, 12 point font.
- Complete the attached W-9 form (this is a requirement to receive a check from a non-profit agency). You must complete the following sections:
 - ✓ Name
 - ✓ Address
 - ✓ Social security number

Application materials must be mailed in one packet. Transcripts and letters of recommendation should not be sent separately. If students have not yet received their college acceptance letter, they may submit their application packet separately but **MUST** submit the letter by the **March 30th deadline**. Incomplete, e-mailed or faxed applications will not be considered. We suggest that you keep copies of your application materials. Scholarship recipients will be announced at the Teen Conference on May 13th. **Recipients must be present at the conference to receive the scholarship.**

Essay Topics:

1. If you could change any one thing in society, what would it be? What would you recommend needs to be done to make this change a reality?
2. Why have you chosen to pursue a career in the helping profession? What motivates you to help others in need of care, assistance, and support?

Application Deadline: March 30, 2020

Send all application materials to:

Prevent Child Abuse – NJ
Attn: Parent Linking Program
103 Church St., Suite 210
New Brunswick, NJ 08901

For Additional Information Contact:

Krystal C. Gold, MSW, LSW, Support
Specialist, Adolescent Programs
kgold@preventchildabuse.nj.org
732.246.8060 ext.139

Diane Dellanno Scholarship Application

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Student Name: _____ Date: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Grade: _____ GPA _____

Name of High School: _____

What essay question are you answering: _____

List the name of all colleges, universities or higher education program applied to:

1. _____	Accepted:	Y___ N___ Not yet___
2. _____	Accepted:	Y___ N___ Not yet___
3. _____	Accepted:	Y___ N___ Not yet___
4. _____	Accepted:	Y___ N___ Not yet___

What major do you plan to pursue?: _____

Letter of Recommendation Instructions

This section to be completed by teacher or school guidance counselor

Name _____ Position: _____

Telephone: _____ How long have you known the student? _____

Letter of recommendation should be given to the student in a sealed envelope. Your letter of recommendation should describe the following: 1) The student's character; 2) Commitment to educational pursuits **and**; 3) Why you believe the student is deserving of this scholarship.

Signature: _____ Date: _____

I agree that all information contained in this application is true and accurate to the best of my knowledge. I also acknowledge and grant permission for any or all of the content of my application to be used by any means deemed appropriate by the selection committee, including, but not limited to, announcement of names of scholarship winners and their qualifications.

Student Signature: _____ **Date:** _____

Prevent Child Abuse-NJ loves success stories. Do you give permission for PCA-NJ to contact you to check on your progress after high school?
___ Yes ___ No