

NEW JERSEY PRESS FOUNDATION

840 Bear Tavern Road, Suite 305 • West Trenton, NJ 08628-1019 • 609-406-0600 • fax 609-406-0300 • foundation@njpa.org • www.njpressfoundation.org

Isaac Roth Newspaper Carrier Scholarship

Child of Adult Carrier Application

Deadline: March 30, 2012

Personal Information

Name _____
Social Security number (*optional*) _____ Birth Date _____
Home address _____
City _____ State _____ Zip code _____
Home Phone _____ E-mail _____

Newspaper Information

Newspaper you work for _____
Date started working as a carrier at this paper _____
Number of months as a carrier on your current route _____
Number of customers on your current route _____
Primary supervisor in the circulation department _____
Supervisor's phone _____

Academic Information

College _____
College city _____ State _____
Expected year of graduation from college _____
Semester and year began college studies _____
Class rank (*if known*) _____ Current grade point average _____
Anticipated size of your graduating class (*if known*) _____

Please turn page

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Activities, Honors and Talents *(You may attach additional pages if you need more space.)*

Extracurricular activities in which you actively participate _____

Community activities in which you actively participate *(organizations, clubs, etc.)* _____

Honors and recognition for outstanding achievements you have received _____

Special talents *(scholastic, artistic, athletic, etc.)* _____

Statement and Permission

I have read all of the information about New Jersey Press Association's Isaac Roth Newspaper Carrier Scholarship program. All of the information I have given in this application and the other required materials is true. If selected, I agree to provide New Jersey Press Foundation with my Social Security number and my official grade transcript (if not submitted with this application). I agree that, if selected, New Jersey Press Foundation may use my statements and likeness in its promotional literature, in print and on the Internet.

Signed _____ Date _____

Required for a Complete Application

Please carefully read the information below and send your entire application by Friday, March 30, 2012, to: **New Jersey Press Foundation, 840 Bear Tavern Road, Suite 305, West Trenton, NJ 08628-1019**

- **The application form**, complete with all information requested.
- **Two essays of 150 words each**, answering these questions:
 - By child of adult carrier:** How has the content of your newspaper improved your school work and enhanced the personal lives of you and your family?
 - By adult carrier:** Why do you like being a carrier?
- **Route Performance Questionnaire**, completed and submitted by the newspaper's circulation director or a district manager.
- **Transcript of your college courses and grades.** A typed list is permitted, but winners will be required to submit official transcripts.
- Up to five **letters of recommendation** from route customers and others who know you well are encouraged.