

## **ESSEX COUNTY EMERALD SOCIETY SCHOLARSHIP APPLICATION GUIDELINES**

The applicant must meet the following guidelines in order to be eligible and or to be considered for the Essex County Emerald Scholarship Application process.

- Applicant must be a Son, Daughter, Grandson or Granddaughter of an Active Member of the Essex County Emerald Society-Chapter #1.
- Active Member status requires the sponsoring member to be a present dues paying member of the Essex County Emerald Society, specifically, membership dues must be paid for the previous two (2) years.
- Applicant must presently be enrolled and attending a school of higher education, specifically the applicant enrolled must be attending freshman year or higher within the particular application year.
- The applicant will submit a completed Emerald Society Scholarship Application along with a personal bio and or resume documenting their education, educational activities and accomplishments, volunteerism and or any other individual information that the applicant believes would assist the Emerald Society Scholarship Review Committee during the selection process.
- The Applicant must also submit an essay formulating the topic of what their Irish Heritage means to them, at the present time and or as they progress through the higher education process.
- The Application along with the additional documents must be submitted and received by the Essex County Emerald Society Scholarship Review Committee prior to the 15<sup>th</sup> day of November of the Application year.
- Email the completed Essex County Emerald Society Scholarship Application and associated documents to the Scholarship Committee at [essexcountyemeralds@gmail.com](mailto:essexcountyemeralds@gmail.com) or hand deliver to the President or Vice-President of the Essex County Emerald Society.
- Any questions and or concerns associated with the Emerald Society Scholarship Application Guidelines or process, please email the committee at [essexcountyemeralds@gmail.com](mailto:essexcountyemeralds@gmail.com)

**ESSEX COUNTY EMERALD SOCIETY SCHOLARSHIP APPLICATION**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Sponsoring Member Name: \_\_\_\_\_ Department: \_\_\_\_\_

School Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Course of Study: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

ECES USE ONLY:	Date Rec:	App:	Award:
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