



## **Section Two: Military Service**

Have you previously or currently serve in the military, including college ROTC?

Yes                  No

Please describe:

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## **Section Three: Activities**

Please list all activities within each category and include supervisor's name, a brief description of your participation, and any office held.

School Activities:

Community Activities:

Other Activities related to your career goals:

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## **Section Four: SAME Membership**

Scholarship priority is given to SAME members. Student Membership is complimentary at <http://www.same.org>. If you are a member of SAME, please provide your member number:

### Section Five: Educational Goals

Please describe your career goal(s):

Name and address of the College of University you are attending:

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### Section Six: Academic Performance

Provide a **transcript of academic performance for each of the previous three years of schooling, including High School, if appropriate**. If you have transferred, please include a copy of the appropriate academic transcript.

Applicants are required to have a minimum **GPA of 2.5**.

What is your current GPA?

For the 2026-2027 school year, you must be an undergraduate. Please specify your grade for that academic year:    Sophomore                      Junior                      Senior

As of the date of your application, state the number of undergraduate credits earned:

Projected graduated date:

Projected degree(s):

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### Section Seven: SAME Affiliation

SAME affiliation is not a requirement for award. However, we would like to know if you have a family member or friend who is a SAME member, so we may recognize them.

Name of family or friend who is a member of SAME:

Family or friend's SAME membership number:

### Section Eight: Recommendations

An important part of your application's evaluation is recommendations from your teachers, professors, employers, coaches, etc. The applicant is encouraged to provide more than one recommendation. All recommendations should be attached to this completed application when submitted. ***Recommendations can be in the form of letters or in the format provided on the last page of this application.***

Recommendation letters may be emailed separately from the application. The subject line must be: **2026 NJ SAME Scholarship Recommendation – <Your Name>**.

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### Section Nine: Employment

Please provide a brief narrative on the reason(s) why you obtained employment:

Provide a list of each employer's name, the time period employed and number of hours worked per week for each employment position for the last two years:

Please provide your most recent employer's name, address, phone number, supervisor's name, and brief description of your assigned tasks:

Company Name:

Address:

Phone Number:

Supervisor:

May we contact your supervisor to confirm your employment history?    Yes            No

Description of Tasks:

**Section Ten: Additional Information or Circumstances**

Provide any additional information or descriptions of circumstances that you believe the Scholarship Selection Committee should consider during its review of your application. Please attach additional pages as appropriate.

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**Section Eleven: Signature**

I recognize that the committee may request additional or supplemental information for this application. I agree to the best of my ability to supply the requested information. I understand that the committee ***may reject*** an incomplete application.

If selected to receive this one time scholarship award, I agree to allow photographs taken of the award presentation to be posted on the SAME website and other SAME scholarship related materials.

Applicant's Signature:

Date:

## Recommendation Form

Student Name:

Please provide a brief description of the club/organization/activity from which your recommendation of the student is based.

Please list any awards/achievements the student has received/accomplished from your club/organization/activity.

Name, title and organization affiliation of the person recommending including contact information, should there be any questions concerning the recommendation.

Name (print or type):

Title/Position:

Organization:

Phone Number:

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