

**OCEAN COUNTY VOCATIONAL TECHNICAL SCHOOL  
2019/2020 POST-SECONDARY SCHOLARSHIP**

This is a tuition award that may only be applied to post-secondary programs offered by the Ocean County Vocational Technical School. The deadline for ALL application submittals will be Friday, May 24, 2019.

**Criteria:**

1. Applicant must have a strong desire to succeed in a vocational/technical program and possess a clearly defined career goal that will take full advantage of the educational opportunity provided by OCVTS.
2. Applicant must demonstrate strong character and ability through completion of the application process.

**Application Process:**

1. Completion of the Scholarship Application form and **return of this cover page with name, signature, and date.**
2. **Completion of a personal essay outlining career goals.**
3. If the applicant is currently enrolled in high school; they will need to submit their latest high school transcript and current senior report card with attendance records. If the applicant is currently an adult, a copy of their high school diploma or high school equivalency diploma is required.
4. Submission of **two forms of recommendation** (no friends or relatives) establishing the integrity and motivation of the applicant. If currently an OCVTS student, one recommendation **must** come from your vocational instructor.
5. A completed and separate **Application for Post-Secondary Admissions** form and medical form **must** be on file as part of this scholarship application process in addition to all the required scholarship submittals.

**Return applications to:**      **Mary Beatty-Sharisky, Principal of Adult Education**  
   **Ocean County Vocational Technical School**  
   **1299 Old Freehold Road**  
   **Toms River, NJ 08753**  
   **C/O Jacqueline Lamazza – Post Secondary Admissions, Adm. Asst.**

**Telephone: 732.473.3159**

**SCHOLARSHIP GUIDELINES:**

- To remain in the scholarship program, students must maintain a minimum **“C” average** in their OCVTS program of study and adhere to attendance standards in accordance with the OCVTS Student Agreement.
- All post-secondary scholarship recipients will have their academic progress and attendance evaluated every nine weeks by a representative of the scholarship committee. Students failing to follow the guidelines will be placed on academic probation. Students who remain non-compliant after being placed on academic probation will have their scholarship terminated and receive a bill for the remainder of the course for which they are enrolled.
- The Post-Secondary Scholarship Committee will review applications and award scholarships. Priority will be given to applicants interested in non-traditional careers and students with personal, financial, or family problems that present a barrier to post-secondary education. **Such special considerations should be indicated in the personal essay content or counselor’s comments section of the application.**
- The tuition award may only be applied to programs offered by the Ocean County Vocational Technical School. **NOTE: Post-secondary enrollment is based upon space availability on date of course application.**
- The scholarship award does not include books, lab fees, or other supplies, if needed.
- There are a very limited number of scholarships available.
- Scholarships will be awarded on a rolling basis after the May 24<sup>th</sup> deadline for scholarship applications.
- Scholarships must be used during the 2019/2020 school year.

*By signing below, I acknowledge and accept all of the above agreements regarding the OCVTS post-secondary scholarship award.*

\_\_\_\_\_   
(Print) Applicant’s Name

\_\_\_\_\_   
Applicant’s Signature

\_\_\_\_\_ Date

How did you hear about this program? \_\_\_\_\_



## POST-SECONDARY SCHOLARSHIP RECOMMENDATION FORM

---

Applicant's Last Name	First Name	Middle Initial
-----------------------	------------	----------------

The above student has applied for a scholarship at the Ocean County Vocational Technical School district. To the best of your knowledge, please complete the recommendation form below.

**Please Check:**

- |                                |                   |                 |             |
|--------------------------------|-------------------|-----------------|-------------|
| 1. General academic ability    | Outstanding _____ | Competent _____ | Weak _____  |
| 2. Vocational-technical skills | Outstanding _____ | Competent _____ | Weak _____  |
| 3. Responsible                 | Always _____      | Sometimes _____ | Never _____ |
| 4. Well Disciplined            | Always _____      | Sometimes _____ | Never _____ |
| 5. Mature                      | Always _____      | Sometimes _____ | Never _____ |

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Person Making Recommendation: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

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

Phone: \_\_\_\_\_

