



New Jersey School
Buildings & Grounds
Association
Burlington County Chapter

JOHN RAMOS MEMORIAL
SCHOLARSHIP PROGRAM
PACKET
2023 - 2024

“Certified Educational Facilities Managers”
Dedicated to a Clean, Safe and Healthy Environment at Your
Children’s School



New Jersey School Buildings & Grounds Association Burlington County Chapter

NJSB&GA Burlington County Officers:

President: Thomas Fryc – Bordentown Regional School District

Vice President: Kevin Greene – Southampton Twp. B. O. E

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Chairman: Michael DiGiovanni – Delran BOE

Kevin Greene – Southampton Twp. B. O. E.

Bruce Doty- Past County/State President, Retired

Richard Winter- Maple Shade BOE

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The Burlington Chapter of the New Jersey School Buildings and Grounds Association seeks to assist students who will continue their education by offering scholarships to high school seniors in search of an Associate or Bachelor's degree; or training in the Trades or Technology fields. This Scholarship Program is open to any graduating senior, who is enrolled in a high school within Burlington County. Candidates must meet all school criteria, and are scheduled to graduate June 2024, to be eligible to apply. For 2024, a total of 4, \$1,000 scholarships will be awarded; with selections based on the criteria set forth in this application. The corresponding District Facility Manager and/or their designees will attend the high school award ceremony, to present the scholarships to the selected candidate. The scholarship payment will be made directly to the recipient upon proof of acceptance to an accredited college or trade school. Individuals interested in being considered for this scholarship must complete all application materials listed below and submit all required documents by the submission deadline. **All applications must be either emailed or postmarked no later than Wednesday April 17, 2024.**

☐ **By checking this box, you agree to release all photos obtained for use in the NJSBGA publications including but not limited to our website. NJSBGA never sells or shares data to those outside of our organization.**

NJSBGA - Scholarship Index

- Application Form – pages 3 thru 9
- Procedure for submitting application form and judging criteria – page 4
- Applicant's Personal Information – page 5
- ACT/SAT Scores – Official High School Transcript verified and signed by School Official - page 6
- Extracurricular activities, Honors, Awards, Work, and Field of Interest - page 7
- Essay sheets - pages 8 and 9

Two (2) letters of recommendation **must accompany your application;** from a principal, administrator, counselor, teacher, employer or clergy; attesting to your character and deserving candidacy.

All applications and attachments are to be paper clipped together (no staples please).
Mail your application packet, along with substantiating documentation to:

the JRM Scholarship Program
Michael DiGiovanni; CEFM
Director of Facilities
22 Hartford Road; Delran, NJ 08075



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Or email to; mdigiovanni@delranschools.org
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Procedure for Submitting Application

1. This information packet contains all the materials necessary to participate in the NJSBGA Burlington County Chapter scholarship program.
2. The scholarship information should be completed by both the applicant and his/her principal or counselor. As the instructions indicate, the applicant's principal or counselor should complete Parts I, II and III, while Parts IV, V, VI, and VII are to be completed by the applicant.
3. **PLEASE COMPLETE FORMS ON ONE SIDE ONLY --- FOR EASE OF COPYING.**
4. Please refrain from the use of abbreviations in completing your forms
5. Ensure that all required forms are signed and enclosed in your packet. No application will be considered if late, or missing application pages or attachments.

All applications and attachments are to be paper clipped together (no staples please).

Judging:

The criteria for the judging of the applications will be as follows:

Financial need	25 points
ACT or SAT composite scores	20 points
Transcript; Grade point average;	10 points
Curriculum load	10 points
Extracurricular activities/work activities	10 points
Essay	<u>25 points</u>
Total:	100 points



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Name _____ Date: _____

Address _____ Phone: _____

_____ (Town, State, Zip Code)

E-Mail address: _____

Father's (*Male Guardian*) Name: _____ Occupation: _____

Place of Employment: _____

Mother's (*Female Guardian*) Name: _____ Occupation: _____

Place of Employment: _____

Financial Need: Please indicate your family's adjusted gross income from their last filed tax return.

Under \$15,000 _____	\$45,000 to \$60,000 _____
\$15,000 to \$20,000 _____	\$60,000 to \$75,000 _____
\$20,000 to \$25,000 _____	\$75,000 to \$90,000 _____
\$25,000 to \$35,000 _____	\$90,000 to \$105,000 _____
\$35,000 to \$45,000 _____	\$105,000 to \$120,000 _____
Over \$120,000 _____	

Total number of family members living at home: _____

Number of dependent children at home: _____ Ages: _____

Number of dependents attending college/post-secondary, including yourself: _____

Other financial considerations, which need to be noted: _____

Signatures: _____
Student Parent



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Please request your school principal or guidance counselor to provide the information requested in the following parts I, II and III.

APPLICANT'S NAME: _____

Name of High School: _____

I. COLLEGE ENTRANCE EXAMINATION SCORE: (One must be completed)

ACT _____ SAT _____

II. Cumulative High School Grade Point Average: _____

If other than 4.0 GPA system is used, indicate 4.0 equivalency or point system.

(Copy of official transcript from high school must be included with application)

III. Two (2) Letters of Recommendation attesting to the applicant's character and deserving candidacy from a Principal or School Administrator, Counselor, Teacher, Employer, or Clergy.

Date of High School Scholarship, Awards, or Recognition Ceremony:

School Ceremony Contact Information:

Name/Title: _____

Phone Number: _____

Email: _____

College to which you have been accepted: Yearly Cost: \$ _____

College(s) to which you have applied (list in order of preference):

1. _____ Yearly Cost: \$ _____

2. _____ Yearly Cost: \$ _____

3. _____ Yearly Cost: \$ _____

Do you have a family relation to an NJSBGA State or Local Chapter Officer, Board Member, Member, or Representative? ____ YES ____ NO

If YES, please provide the name and position: _____



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(May attach additional sheet or student resume)

IV. Honors, Awards, Recognition(s), or Outstanding Academic Achievements:

Signature – Principal – Counselor – Admission's Officer

Title

Printed Name

V. EXTRACURRICULAR ACTIVITIES

Please indicate various activities, clubs, and organizations: indicating degree of involvement, leadership roles and areas of service; school, community, social services, or religious.

VI. WORK ACTIVITIES:

a) Are you currently employed? Yes____ No____ If yes, what type of work and how many hours per week.

b) Describe your other work activities (such as hobbies, helping at home, family business, etc.)

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All applications and attachments are to be paper clipped together (no staples please).