

# Bobby Fulton Scholarship Fund

providing financial assistance to exceptional young men and women

## SCHOLARSHIP APPLICATION

**Prospective students must complete this application in full and typed.** Please be mindful to include all requested backup material and have your guidance counselor sign as verification. Failure to complete the application in full and provide all requested materials will result in rejection.

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

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

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

Telephone : \_\_\_\_ \_\_\_\_ \_\_\_\_\_ Email : \_\_\_\_\_

Social security number : \_\_\_\_ \_\_\_\_ \_\_\_\_\_ Date of Birth : \_\_\_\_ \_\_\_\_ \_\_\_\_

Parents names : \_\_\_\_\_

Parents telephone : \_\_\_\_ \_\_\_\_ \_\_\_\_\_

High school name and class rank : \_\_\_\_\_

Current GPA : \_\_\_\_\_

SAT or ACT score : \_\_\_\_\_

**List all extracurricular activities – include awards or special recognition – on a separate page**

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### **Please include the following attachments:**

- Complete FAFSA form showing EFC number**
- Copy of high school transcript**
- Copy of SAT / ACT score report**
- A Letter of Recommendation from someone not related to you**

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

Guidance Counselor Signature : \_\_\_\_\_

Mail the completed form and all related material to:

**Bobby Fulton Scholarship Fund  
901 E. Clements Bridge Rd.  
Runnemede, NJ 08078**