



## New Jersey Golf Foundation 2019/2020 Peter A. Famiano Memorial Scholarship Application

### **General Information**

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The New Jersey Golf Foundation's Peter A. Famiano Memorial Scholarship is awarded annually to honor Peter and his dedication to the game. This scholarship will go to a worthy junior golfer who exemplifies the qualities that made Peter the husband, PGA Professional and man that he was...

*Professionalism, Integrity, Volunteerism and a Willingness to Help Others*

This is a \$2,500 annual scholarship (\$10,000 maximum) which is open to college students of any Class year provided they continue to meet the standards set forth by the Scholarship Committee.

### **Application Procedures**

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1. Complete the applicant's section and have a PGA Professional attest to your eligibility.
2. Have your parents (or guardian) complete the last section and attach a copy of pages 1 & 2 of their 2017 & 2018 Federal Income Tax Return.
3. Submit a copy of your high school transcript which should include your class rank and/or cumulative Grade Point Average, and your College Board SAT scores.
4. Include a letter describing your volunteerism and reasons you feel that you are a worthy candidate.
5. Return all appropriate forms prior to the application deadline on May 15, 2019.

### **Selection Criteria**

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The NJGF Scholarship Committee reviews all applications using the following criteria: Scholarship achievement, qualities of character and leadership, financial need, volunteer history and college board SAT scores.

### **Award Notification**

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Scholarship award notifications will be sent out in June 2019.

The recipient will be asked to participate in a 'Beat the Scholarship Recipient' on a par 3 during the Peter Famiano Memorial Pro Am held at Trump National Golf Club, Bedminster on June 27, 2019.



## **Questions and Additional Information**

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If you have any questions or need any additional information regarding the scholarship, please contact the New Jersey Golf Foundation at the following address:

NJ Golf Foundation  
PO Box 7018, Bedminster, New Jersey, 07921

You may also visit [njgolffoundation.org](http://njgolffoundation.org) or email Chris Hunt, [chunt@pgahq.com](mailto:chunt@pgahq.com).



## 2019/2020 Peter A. Famiano Memorial Scholarship Application

### Applicant Information

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Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

High School: \_\_\_\_\_

Have you received an award or applied for this program before? (Y/N)

If so, when? \_\_\_\_\_

Other college(s) enrolled in or applying to: \_\_\_\_\_

Anticipated College graduation date: \_\_\_\_\_ College Major/Minor: \_\_\_\_\_

Honors/Activities: \_\_\_\_\_

### Parents/Guardian Information

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Father's (Guardian's) Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

2015 Wages/Salaries: \$ \_\_\_\_\_ 2016 Estimate: \$ \_\_\_\_\_

Untaxed Income: \$ \_\_\_\_\_ (Child Support, Welfare, Disability, etc.)

Mother's (Guardian's) Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

2015 Wages/Salaries: \$ \_\_\_\_\_ 2016 Estimate: \$ \_\_\_\_\_

Untaxed Income: \$ \_\_\_\_\_ (Child Support, Welfare, Disability, etc.)

*\*Please attach a copy of pages 1 & 2 from your parent's or guardian's 2017 and/or 2018 Federal Income Tax Returns*



Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

List facility where you play most of your golf: \_\_\_\_\_

Special Circumstances (if any): \_\_\_\_\_

Parent's (Guardian's) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application Deadline: May 15, 2019**