



**FRANKLIN TOWNSHIP DR. MARTIN LUTHER KING  
COMMUNITY FOUNDATION**

**2019 SCHOLARSHIP APPLICATION PACKET**

Scholarships will be awarded to **ANY** Franklin High School Senior regardless of race or religion.

- 1) Qualifications
  - A. Acceptance as a candidate at an accredited college or professional school.
  - B. Graduating this year from Franklin High School.
- 2) Please provide the **ALL** following items in the application packet. **INCOMPLETE application packets will NOT be considered.**
- 3) Scholarship recipients are based on the following criteria:
  - A. Three (3) letters of recommendation – from two (2) current teachers in Franklin High School and a third adult (1) such as clergy, employer, guidance counselor or teacher.
  - B. Franklin High School Transcript with official school seal and signature.
  - C. A record and explanation of your community involvement and volunteerism.
  - D. Essay on the topic “How Do We Keep Dr. King’s Dream Alive Today,” 500-700 words typed, double-spaced.
- 4) **All completed application packets must be mailed to:**  
**Franklin Township Dr. Martin Luther King Community Foundation**  
**P.O. Box 5684**  
**Somerset, NJ 08875**
- 5) **Entire completed application packet must be received by Friday April 12, 2019.**
- 6) Scholarship recipients will be announced at the annual Franklin High School Senior Awards Assembly.

**MARTIN LUTHER KING SCHOLARSHIP APPLICATION FORM**

1. \_\_\_\_\_  
 Last Name                                  First Name                                  Middle Initial

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Street Address                                  City                                  State                                  Zip Code

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Telephone Number                                  Email Address                                  Date of Birth (month, day, year)

2. \_\_\_\_\_  
 Parents/Guardian's name                                  Telephone Number

3. College Choices

1. _____	_____	_____
	accepted	waiting list
2. _____	_____	_____
	accepted	waiting list
3. _____	_____	_____
	accepted	waiting list

4. Anticipated Major

1. \_\_\_\_\_                                  2. \_\_\_\_\_

Other Special Interests \_\_\_\_\_

5. Do you agree to allow the Franklin Township Dr. Martin Luther King Community Foundation to reproduce, publish, copy or in any other manner distribute your essay?  
 Yes \_\_\_\_\_                                  No \_\_\_\_\_

6. Do you agree to allow the Franklin Township Dr. Martin Luther King Community Foundation to publish your name as a scholarship recipient and college you will be attending on their website and or publications?  
 Yes \_\_\_\_\_                                  No \_\_\_\_\_

6. \_\_\_\_\_  
 Signature                                  Date