

Historical Preservation Society of Upper Township as Administrators for the Mike Houdart Scholarships for a student who has completed a year in College

The applicant must be a full-time college student.

Applicants will be selected based on a variety of criteria including financial need. The application is to be submitted to the HPSUT Scholarship Committee % Chairman Bill Eisele, 280 Old Tuckahoe Rd, Petersburg, NJ 08270 prior to **May 2, 2026**. **Emphasis is being placed on individual and family participation in all events sponsored by the HPSUT.**

THE FOLLOWING MUST BE SUBMITTED WITH EACH APPLICATION:

- 1. Transcript of college GPA..**
- 2. Applicants must be enrolled as a full-time student.**
- 3. A typed, double spaced essay, not more than 500 words, describing why you have chosen your stated career, and the factors that led to this decision. Include an explanation as to why you feel you should be considered for this scholarship and any special circumstances not already named.**
- 4. A minimum of two personal letters of recommendation from someone other than a relative. (Teacher, Guidance Counselor, Employer, Clergy, Volunteer Director) The packet must be sent to the High School Guidance Office.**

ALL COMPLETED SCHOLARSHIP APPLICATIONS MUST BE RETURNED TO THE HPSUTS SCHOLARSHIP % CHAIRMAN BILL EISELE, 280 OLD TUCKAHOE RD. PETERSBURG, NJ 08270

BY May 2, 2026.

PLEASE READ THIS STATEMENT CAREFULLY BEFORE YOU SIGN BELOW

I understand the scholarship for which I am applying will be given by the HPSUT, as Trustees of the HPSUT Scholarship Fund whose decision will be final. The scholarship will be used to defray part of my education costs at the College of my choice. A check and certificate will be presented in June. Total funds awarded will be based in part on volunteering at HPSUT events.

Signed _____ Date _____
Student

PARENT/GUARDIAN STATEMENT

I, _____, the Parent/Guardian of applicant _____

_____, have read this application, verify its contents to be true, and give my consent to its submission to the HPSUT Scholarship Committee. I authorize the publication of such information by the HPSUT in connection with the announcement of the winners. I understand that the decision of the committee will be final.

The Mike Houdart Scholarship

P PERSONAL INFORMATION

Applicant's name _____
Last First Initial

Permanent Mailing Address _____
Street Apt
Town State Zip code

Telephone Number _____ Date of Birth _____

Email address _____

Parent(s)/Guardian(s) Full Name _____

Address (if different from above) _____
Street Apt #
Town State Zip code

Parents email address _____ Parents Telephone Number _____

EDUCATION

Post secondary School I am attending _____ Telephone # _____

Address _____
Street Town State Zip code

Advisor's Name _____

Career Interest and/or Major _____

Year for which you are applying

Soph, Jr, Sr

Employment (include summer jobs: List last job first)

Position _____ Employer _____

Dates of Employment _____ Hours per week _____
From - To

Position _____ Employer _____

Dates of Employment _____ Hours per week _____
From - To

EXTRACURRICULAR ACTIVITIES, COMMUNITY INVOLVEMENT AND/OR VOLUNTEER WORK

List community (especially activities associated with the HPSUT events), school, church/synagogue, volunteer activity participation:

- HPSUT community wide Road Clean-up
- HPSUT Strawberry Fest
- HPSUT Apple Fest
- Tuckahoe Transportation Heritage Festival
- Santa Express
- Easter Bunny Express
- Other HPSUT events _____
- Other community events _____

Revised 3/16/2026