<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Name of scholarship or award:</td>
<td>Hancouski Fund</td>
</tr>
<tr>
<td>2.</td>
<td>Date established:</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Amount of award to be given:</td>
<td>Three $700 awards</td>
</tr>
<tr>
<td>4.</td>
<td>Date of First award:</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>When will award be given:</td>
<td>End of Spring Semester – to be applied to fall semester</td>
</tr>
<tr>
<td>6.</td>
<td>Number of awards to be given annually:</td>
<td>Based on Accrued interest</td>
</tr>
<tr>
<td>7.</td>
<td>Requirements for candidates:</td>
<td>Must be a male, 2 of the 3 recipients must be in the Accounting major. Must be at least a Junior in the forthcoming academic year in the School of Business with performance and leadership potential. Must be active in student activities. Must have high academic standing. Must submit an essay as outlined in the application.</td>
</tr>
<tr>
<td>8.</td>
<td>Application process:</td>
<td>Students will be notified in a timely manner of the availability of the award. They will be asked to complete the appropriate application and return it to the Ellyn A. McColgan Student Services Center-Room 170 by the deadline date</td>
</tr>
<tr>
<td>9.</td>
<td>Custodians of the award fund:</td>
<td>The Montclair State University Foundation</td>
</tr>
<tr>
<td>10.</td>
<td>Persons selecting the recipients of the award:</td>
<td>The Scholarship Committee</td>
</tr>
<tr>
<td>11.</td>
<td>Source of Funding:</td>
<td>Gift of Michael and Gertrude Hancouski</td>
</tr>
<tr>
<td>12.</td>
<td>Will this be a perpetual scholarship or award:</td>
<td>Yes, it will be awarded each year. Students are invited to apply or re-apply.</td>
</tr>
</tbody>
</table>
The Hancouski Scholarship
For Outstanding Students
School of Business
Montclair State University

Deadline for Application: March 13, 2017

(Please print or type clearly)

Last name ___________________________First name____________________________

CWID#________________________________________________

(Permanent address)
Street____________________________________________________________________

City________________________State__________Zip______________

Telephone #_____________________________________________________

(Temporary address)
Street____________________________________________________________________

City________________________State__________Zip______________

Telephone #_____________________________________________________

ACADEMIC STATUS: _____Freshman _____Sophomore _____Junior _____Senior

Student Activities in College

Honor Societies:____________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Awards:____________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Elected Offices:____________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
Volunteer Activities: _______________________________________________________________
____________________________________________________________________________

Outside Hobbies/Activities: _________________________________________________________
____________________________________________________________________________

Are you currently receiving financial aid: _____ Yes _____ No

If yes: Type Amount

_________________________________________________________
_________________________________________________________
_________________________________________________________
_________________________________________________________

ESSAY:

Discuss in 500 words your professional goals and how your education at Montclair State University will enable you to achieve these goals. Include in your essay how you feel your degree in business will contribute to your total development now and in the future.

I hereby affirm that to the best of my knowledge the information supplied in this application is complete and accurate. I understand that the scholarship is an outright grant and not to be repaid. If I am selected as a recipient, I agree to permit the SBUS to publicize the award.

__________________________________________
(signature)

Montclair State University is an equal opportunity educational institution and considers applications from all qualified students regardless of their race, creed, sex, or natural origin.

PLEASE RETURN APPLICATION TO: Ellyn A. McColgan Student Services Center
Feliciano School of Business, Room 170
Montclair State University
Montclair, NJ 07043

APPLICATION DEADLINE: March 13, 2017

NOTE: ALL AWARDS ARE SUBJECT TO FUNDING BY SPONSORS.