CARLSTADT FIRE DEPARTMENT ENGINE COMPANY TWO

500 Madison Street Carlstadt, New Jersey 07072

Michael A. Schwarz <u>Memorial Scholarship</u>

Engine Company Two of the Carlstadt Fire Department has established a scholarship in memory of Michael A. Schwarz, a 20-year-old Marine killed in action November 2006 in Iraq. Michael was a member of the Carlstadt Fire Department and a 2004 a graduate of Becton Regional High School.

The scholarship is open to all Carlstadt residents graduating from high school this spring and furthering their education. The scholarship will be awarded to students who show dedication and service to their school and community.

Applications will be available starting April 1, 2022 at the Carlstadt Borough Hall 500 Madison Street, Carlstadt. The Borough Hall is open Monday through Friday from 8:30 AM until 4:30 PM. Scholarship applications must be completed and returned no later than May 15, 2022.

The members of Engine Two wish to thank everyone who donated to this Scholarship fund. With your generous support the memory of Michael and his devotion to serve his Country and community will live for years to come. For more information about the scholarship, or to make a contribution, contact the Carlstadt Fire Department at 201-460-3942.

Carlstadt Fire Department Engine Company Two 500 Madison Street Carlstadt, NJ 07072

Michael A. Schwarz Memorial Scholarship Application

Engine Company Two of the Carlstadt Fire Department has established a scholarship in memory of Michael A. Schwarz, a 2004 graduate of Becton Regional High School. This program is to help Carlstadt residents further their education, skills or talents.

Once per year a grant will be awarded based on the applicant's personal qualities such as character and leadership ability. To be eligible for consideration by the Selection Committee of the Carlstadt Fire Department Engine Company Two a candidate must be a Carlstadt resident and be receiving a diploma with this year's graduating class from an accredited secondary school. Applications are to be completed and forwarded to your school principal or guidance councilor for his/her signature. Please have your school return the application and your secondary school record, postmarked by May 15th, to the above address, attention Scholarship Committee.

Thank You.

Criteria for the scholarship:

- Must be a Carlstadt resident
- Must be receiving a diploma with this year's graduating class from an accredited secondary school.
- Must be furthering your education.

PERSONAL DATA

I hereby apply for a scholarship under the Carlstadt Fire Department Engine Two Scholarship Program and submit the following information:

1. Name:	т ,	Tr. /	3.6' 1.11
	Last	First	Middle
2. High School you	_	-	
			, , , , , , , , , , , , , , , , , , , ,
4. Phone Number:			
5. Birth date: Mon			
6. Is your father livi	ng? Yes()No	o () Is your m	other living? Yes ()
7. Full name of fath	er	Dinat	M: 131.
			Middle
9. Father phone nun			
10. Full name of mo	otherLast	First	Middle
11. Full address of r	nother		

Is your mother presently employed? Full Time () Part Time () No () 14. Persons living in you home: Father () Mother () Brothers (list ages only)	13.	Is your father presently employed? Full Time () Part Time () No	()
Brothers (list ages only) Sisters (list ages only) 15. Any of your brothers or sisters in college? Yes () No () If so, how many and what year are they in? 16. Are you a member of a fire department, first aid squad or other emergency service unit? Yes () No () 17. Have either of your parents or guardian been a member of the Carlstadt Fire Department or the Carlstadt Fire Department Auxiliary? Yes () No () 18. Did you earn any money while in High School? Yes () No () If so, list work experience: 19. What college, university or trade school are you considering? (Will not affect aw First Choice Second Choice Third Choice 20. Have you applied for financial aid? Yes () No () 21. What will be your course of study?		Is your mother presently employed? Full Time () Part Time () No	()
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Second Choice	19.		fect award.
Third Choice		First Choice	
20. Have you applied for financial aid? Yes () No () 21. What will be your course of study?		Second Choice	
21. What will be your course of study?		Third Choice	
	20.	Have you applied for financial aid? Yes () No ()	
22. Have you received any honors, prizes or scholarships?	21.	What will be your course of study?	
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	44.		

ACADEMIC INFORMATION

1. Please indicate your OFFICIAL Junior year end cumulative average:					
Indicate the curriculum you are currently taking. (Select only one.)					
Honors or Advanced Placement () College Preparatory () General Studies ()					
2. Class Rank - Your applica	tion cannot	be accur	rately e	valuated	d if this is omitted.
A. Enter your exact class	rank at the e	end of yo	our juni	or year:	:
B. Enter the size of the cl	ass:				
C. If your school does not for an alternative, such				guidan	ce counselor
SC	HOOL	ACT	IVI	ΓIES	
Put an 'X' in the box under each that you participated as a mem		t you we	ere an e	lected o	or appointed officer or
1. Student Council President Vice President Secretary Treasurer Representative	Grade	9 () () () ()	10 () () () () ()	()	12 () () () () ()
2. Class Officer President Vice President Secretary Treasurer Representative	Grade	9 () () () ()	10 () () () ()	()	12 () () () ()
3. National Honor Society President Vice President Secretary Treasurer Representative	Grade	9 () () () () ()	10 () () () () ()	11 () () () () ()	12 () () () ()
4. Newspaper/Magazine Editor Assistant Editor Business Manager Staff/Contributor	Grade	9 () () ()	10 () () ()	11 () () () ()	12 () () () ()

5. School Yearbook Editor Assistant Editor Business Manager Staff/Contributor	Grade	9 () () ()	10 () () ()	11 () () ()	12 () () () ()
6. Key Club President Vice President Secretary Treasurer Representative	Grade	9 () () () ()	10 () () () ()	11 () () () () ()	12 () () () () ()
7. Debate Team	Grade	9	10	11	12
8. Band Concert Band Pep Band	Grade	9 () ()	10 () ()	11 ()	12 () ()
9. ROTC	Grade	9	10 ()	11	12
10. School and Classroom rel Club, etc.). Indicate the clu Club Name				n and th	
11. State/National Awards and Indicate the number of awa levels. (For example, Girl's Semi-Finalist.) Enter the fo	rds/honors /Boy's State	e Delega	te, All-	State Cl	noir, National Merit

levels. (For example, Good Citizen A	rs received each year at the school and local Award, American Legion, 4-H, All-Star, four-year total and list them on the lines below.
Total	
4	
13. Inter Scholastic Athletics Indicate the inter-scholastic athletic t football, soccer, track, etc.) and enter	eams participated in for each year. (For example, the four-year total.
Sport/Activity	Number of Years
(Market State Stat	
	s participated/belonged to for each year. (For ups, Salvation Army, CYO, Jr. Jaycees, etc.) and
Name	Number of Years

Indicate the community activities (not associated wit participated/belonged to for each year. (For example Special Olympics, Hospital Volunteer, Neighborhood Counselor, etc.)	, soup kitchen, drug hotline,
16. Other Activities, Interests, and Goals:	
The information that I have provided is true to the best of	f my knowledge.
Signature of Applicant	Date
Signature of Applicant's Parent/Guardian	Date
I certify that the applicant is a student in good standing at	t our school.
Signature of Principal or Guidance Counselor	Date

IN MEMORY OF OUR FALLEN BROTHER



LCPL MICHAEL A. SCHWARZ UNITED STATES MARINE CORPS

OPERATION IRAQI FREEDOM NOVEMBER 27, 2006