



# Mercer County Professional Counselors Association

## Many Languages, One Ambition ESL Scholarship Application

\$250 - \$1,000

Application Deadline – Thursday, April 10, 2025

**Criteria:**

- English is not the recipient’s primary language.
- The recipient must demonstrate financial need.
- Applicants not qualified for any other financial assistance will be given priority.
- The recipient should be able to maintain a cumulative B or 3.0 average on a 4.0 scale.
- The recipient must be a member of the current graduating class, attending a Mercer County public or parochial school.
- The recipient must be able to prove acceptance to an accredited college prior to receipt of the award.
- The recipient’s School Counselor must be a member in good standing of Mercer County Professional Counselors Association by March 21, 2025, and the entire application packet received by 4/10/25 at the address listed below.

**Information to Submit to Selection Committee:**

- Nominee Background Information
- Official high school transcript
- Counselor recommendation \*
- Essay clarifying to the selection committee why the applicant is deserving of this scholarship.

\*Recommendation is mandatory, and its exclusion will disqualify applicants for this scholarship.

### Nominee Background Information

**PLEASE PRINT OR TYPE**

Full Name of Applicant \_\_\_\_\_  
First Last Middle Initial

Home Address \_\_\_\_\_  
Street City/State Zip

Telephone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Applicant’s Email \_\_\_\_\_ Primary Language \_\_\_\_\_

**THIS SECTION IS TO BE COMPLETED BY THE APPLICANT’S COUNSELOR:**

Are you a current member of MCPCA? If not, please submit the mandatory membership application and fee by March 21, 2025. Membership applications can be found at [www.mcpcanet.net](http://www.mcpcanet.net).

High School \_\_\_\_\_ Grade Point Average \_\_\_\_\_ on a \_\_\_\_\_ scale.

Counselor’s Name \_\_\_\_\_ Counselor’s Signature \_\_\_\_\_

Counselor’s Email \_\_\_\_\_

**Counselor’s signature verifies that the application is complete with the necessary counselor recommendation, transcript, and essay. Counselor must be a member of MCPCA prior to March 21, 2025.**

**Mail entire application packet to:  
Mrs. Kathy Jensen  
MCPCA  
81 Village Drive East  
Hamilton, NJ 08620**

**NO EMAILED DOCUMENTATION WILL BE ACCEPTED.**

First Name

Last Name

Please list significant activities, leadership positions, and honors/recognitions. Place an (X) in the grade column when activities occurred. You may attach a student resume instead.

Activities	9	10	11	12	Leadership Position/Honors

List Community Activities:

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**Applicants must submit an essay clarifying why you would be deserving of this scholarship. Typed essays are encouraged and must be attached. Please be sure to place your name on any attached documentation.**

*Applications received after April 10, 2025 will be excluded.*  
**No emailed documentation will be accepted.**  
**Counselor must be a member of MCPCA prior to March 21, 2025.**

