

Class of 2026 MCST PTO Scholarship Application

COMPLETED APPLICATION DUE BY Monday, April 27, 2026

MCST PTO Scholarship Application Instructions:

1. To be eligible for this scholarship, at least one parent or guardian must have been a paid PTO member for all four years of the student's high school enrollment at MCST's Denville campus.
2. Please read and complete the entire application carefully.
3. Additional sheets may be attached if your activities, volunteer work, or employment history exceed the space provided.
4. A completed application includes ALL of the following. Incomplete applications will not be considered for review or eligibility.:
 - a. Application Form (3 pages, including signature)
 - b. Two (2) Typed Letter of Reference:
 - One (1) Academic reference
 - One (1) Volunteer Supervisor or Employer reference
 - c. Essay (approximately 350 words, double spaced typed)

SUBMIT YOUR COMPLETED APPLICATION TO ASHLEY BROOKS, GUIDANCE DEPARTMENT ON OR BEFORE MONDAY, APRIL 27, 2026.

Notification and Scholarship Awards

- ✓ Up to three (3) recipients will each receive a \$1,000 scholarship.
- ✓ Recipients will be notified by email by Sunday, May 31, 2026.
- ✓ Certificate will be presented at the MCST Award Ceremony in June 2026.

Distribution of Funds

Scholarship funds will be disbursed by the MCST PTO directly to the recipient.

Questions? Please contact Shefali Saraf via email at shefalisaraf@gmail.com or phone at 908-251-0190.

CLASS OF 2026 MCST PTO Scholarship Application Form

ABOUT YOU

Name: _____

Address: _____

Phone: _____

Email: _____

(Please type or print clearly to ensure accurate communication.)

High School Academy: _____ Unweighted GPA: _____

POST-GRADUATION PLANS

Name of college, university, or vocational/trade school you plan to attend in Fall 2026:

Type of School: _____

School Name: _____

School Address: _____

EXTRACURRICULAR ACTIVITIES

(School-related, community sports, clubs etc. from the past four years. List most recent first.)

ACTIVITY #1:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:
ACTIVITY #2:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:
ACTIVITY #3:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:
ACTIVITY #4:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:
ACTIVITY #5:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:
ACTIVITY #6:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:
ACTIVITY #7:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:
ACTIVITY #8:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:
ACTIVITY #9:	<i>Dates of Participation:</i>
Contact Name:	Contact phone or email:

VOLUNTEER/COMMUNITY SERVICE

*(Include Scouts, faith-based, animal rescue, or community programs from the past four years.
List most recent first.)*

Activity and Sponsor:		
Description of Service:		
Contact Name:	Contact phone/email:	Date of Participation:

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Description of Service:		
Contact Name:	Contact phone/email:	Date of Participation:

EMPLOYMENT HISTORY

(List most recent first.)

Employer:	<i>Dates of Employment:</i>
<i>Address:</i>	
<i>Supervisor Name:</i>	<i>Phone/Email:</i>

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<i>Address:</i>	
<i>Supervisor Name:</i>	<i>Phone/Email:</i>

REFERENCES

All applicants MUST submit TWO (2) typed letters of recommendation.

Family members may NOT serve as references.

- ONE (1) Academic Reference (teacher, counselor, or administrator)
- ONE (1) Volunteer or Employer Reference

ESSAY QUESTION

Please respond to the following question in a typed, one-page essay (*approximately 350 words, double spaced*):

How has your MCST Academy experience prepared you for your future?

Attach your essay to this application.

CERTIFICATION AND SIGNATURE

I certify that I have personally completed this application for the MCST Parent Teacher Organization Scholarship and that all the information provided is accurate to the best of my knowledge. I also grant permission for my name and /or photograph to be used for public relations purposes if selected as a recipient.

Student Signature: _____ **Date:** _____

Parent/Guardian Signature (if applicant is under 18 years of age):

Parent Signature: _____ **Date:** _____

Please Print Name: _____