

Shy Touba Memorial Scholarship
Friends of the Westwood Library

Name: _____

Address: _____
(must reside in Westwood)

Phone & Email: _____

Name of Program Enrolled (MUST BE ALA ACCREDITED): _____

of credits completed towards MLS _____ **# of credits currently enrolled** _____

Employment History: _____

Volunteer History: _____

Education (school, degree earned):

Please include the following:

- Copy of acceptance letter**
- Transcript of current grades—must have completed 12 credits at time of submission with a minimum B average**
- Personal statement of career goals**
- Two letters of recommendation**
- Proof of residency in Westwood**

Mail completed application and additional materials requested by APRIL 1, 2023 to:

Westwood Public Library, 49 Park Avenue, Westwood NJ 07675