

**Friends of the Westwood Library Scholarship Application
(eligibility requires residence in a BCCLS community)**

NAME: _____

ADDRESS: _____

PHONE: _____ **EMAIL:** _____

NAME OF PROGRAM ENROLLED (MUST BE ALA ACCREDITED): _____

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

EMPLOYMENT HISTORY (organization, position, dates of employment)

VOLUNTEER HISTORY (organization, position, dates of service)

EDUCATION (school, dates, major, degree earned):

Please include the following:

- Copy of acceptance letter from an ALA accredited library school**
- Transcript of current grades if enrolled**
- Personal statement of career goals**
- Two letters of recommendation**
- Proof of residency in BCCLS community**

**Mail completed application and additional materials requested to:
Westwood Public Library, 49 Park Avenue, Westwood, NJ 07675**

Scholarship application must be received by March 1