SOL B. HECKELMAN MINORITY UNDERGRADUATE STUDENT SCHOLARSHIP

The Sol B. Heckelman Minority Student Scholarship is given to encourage and support minority students interested in furthering their education in a mental health field. This award is given to a minority undergraduate student who has demonstrated, by virtue of academic excellence and community volunteer efforts, a promise to pursue a career in the field of school psychology. This $1000.00 award is provided for educational purposes only and the recipient must be enrolled in an undergraduate psychology program at a college or university within New Jersey.

NOMINATION PROCEDURES

The Nominator (Faculty Member) must:
1. Complete this nomination form
2. Complete a one to two-page statement indicating why this student should receive the award

The Student (Candidate) must:
1. Obtain (1) additional letter of recommendation from a university or community representative reflecting academic potential and community/volunteer and/or work done through professional organizations that demonstrates service to benefit others within the community.
2. Complete a personal statement (minimum 250 words) responding to the following question:
   a. As a School Psychologist, what issues would you like to address and how would you address them?
3. Submit a copy of the student’s Unofficial transcript via email in PDF format (Official transcript may be required upon acceptance of the scholarship)

Nominator and Student should submit nomination materials, separately in email, to arrive no later than Tuesday, March 30, 2021 at 5pm to the NJASP Diversity Committee at diversity.njasp@gmail.com. Please email with any questions regarding the scholarship.

NJASP’s Awards Committee will review the applications and make a selection based on the materials received. Award winners will be announced at the Spring Conference in May, date TBD. An NJASP representative will contact all Nominators by April 19, 2021. The Nominator agrees to coordinate the winner’s attendance at the awards ceremony, which will take place during the spring conference.

NOMINATOR'S (FACULTY MEMBER) INFORMATION

Name of Nominator/Title

Employment/University Name & Address:

Work Phone: __________________________ Email: __________________________

STUDENT'S (CANDIDATE) INFORMATION

Name of Candidate

Address, City, State, & Zip

Home/Mobile Phone: __________________________ Email: __________________________

School Name/Academic Major(s)/Minor(s)/Certification Programs: