

# KEVIN J. HANNAFORD, SR. FOUNDATION, INC.

### Dear Scholarship Applicant,

BOARD OF DIRECTORS

EILEEN A. HANNAFORD

CHAIRPERSON

PATRICK D. MCGINLEY

SECRETARY

**ELIZABETH SARACENO** 

FRIENDS OF THE FOUNDATION DOUG FOWARDS SUZETTE FERNANDES PATRICIA GILBRETH NANCY HANNAFORD KEVIN J. HANNAFORD, JR. PATRICK J. HANNAFORD ADAM & SUSAN KASTIN MARY MCGINLEY THOMAS G. MCLOUGHLIN

SHEILA NUGENT CARTER **MEAGHAN PIZZO** 

REVEREND FATHER MICHAEL WARD

We hope this letter finds you well. With great pleasure, we announce the opening PRESIDENT/EXECUTIVE DIRECTOR of the Kevin J. Hannaford, Sr. Foundation, Inc. Scholarship Program for the 2025-2026 academic year.

> Established in memory of Kevin J. Hannaford, Sr., who tragically lost his life in the September 11th attacks, the Foundation continues his legacy by providing financial support for students who have experienced the loss of a parent.

This scholarship is open to children residing in **Bernards Township or** Bernardsville, NJ, who have lost a parent and demonstrate Kevin's qualities: honesty, enthusiasm for learning, respect, responsibility, and community spirit.

We admire your strength and determination in pursuing your education and are honored to offer support through this program. We look forward to learning more about you.

> Warm regards, Eileen, Patrick, and Kevin, Jr. Hannaford President and Founders

## To Apply: Submit the following by May 19, 2025

- 1. Completed application form (below).
- 2. Your most recent school transcript.
- 3. A one-page typed essay describing your personal experience and educational goals. (A parent/guardian may complete this for younger children.)
- 4. **First-time applicants only**: one letter of recommendation from a non-family adult.
- 5. Returning applicants who received a scholarship in 2024 do not need to submit a recommendation letter.

#### Submit materials to:

Kevin J. Hannaford, Sr. Foundation, Inc. 2201 3rd Ave. Spring Lake, NJ 07762 www.kevinhannaford.org/scholarship.html

Awards will be announced in June 2025

Questions? Contact Tom McLoughlin at 908-672-8487



# KEVIN J. HANNAFORD, SR. FOUNDATION, INC.

# 2025 Scholarship Application Form

Applicant Information			
Name:			
Address (City, State, ZIP):			
Phone:Email:  Date of Birth:(Must be age 24 or younger)			
Date of Birth:(Must be age 24 or younger)			
School attended during 2024–2025:			
Grade completed by June 2025:			
Grade completed by June 2025: School you will attend for 2025–2026:			
☐ Resident of Bernards Township or Bernardsville,			
NJ. How long?			
Family Information			
Name of Deceased Parent:			
Date of Death:			
Date of Death: Briefly describe the circumstances of death:			
List of Siblings or Dependents:			
Name, Birth Date, School/Employment			
Activities			
List school and extracurricular activities, including work experience:			
Reference (Only for first-time applicants)			
Referrer's Name:			

Address:		
Phone:	Email:	
Financial Resources		
•	me (from most recent federal t 50,000–\$100,000 \( \square\) \$100,000 0 \( \square\) Over \$200,000	,
Please explain any spe	cial financial circumstances:	
Address:Phone:	me:Email:	
Other Aid  Have you applied for f  ☐ Yes ☐ No	inancial aid, grants, or scholar	ships?
b)	pated amounts:	
<ul><li>Incomplete or l</li><li>The Foundation</li></ul>	materials, including letters of late applications will not be con may request additional information.	
I certify that all the infe	formation provided is accurate	and complete.
Signature of Applicant Signature of Parent/Gu	i: ıardian:	-