

NJSBBP Scholarship Award Program

Goal

To encourage and reward a high school blood donor chairperson for their efforts in stimulating interest and increasing the available blood supply in New Jersey.

Scope

Any high school junior or senior blood donor chairperson is eligible. Each blood center in NJ should submit the names of the high school participants along with required information to the review committee.

Recognition

The donor chairperson chosen will receive an award of \$500 to be used by the recipient to further their educational goals. This award will be provided directly to an institution of higher learning or an advanced educational program that the recipient will designate to the Society.

This scholarship will be presented at the annual NJSBBP meeting.

Time Frame

The blood drive must be conducted between September 1, 2002 and February 28, 2003. The required information application must be returned to the community blood center by March 1, 2003, and forwarded to the review committee no later than March 15, 2003.

Review Process

The Scholarship Committee of the NJ Society of Blood Bank Professionals will review all applications (see attached). All decisions of the NJ Society of Blood Bank Professionals will be final.

Criteria for Participants

The blood donor chairperson must be a student in good standing in the participating high school. See attached application.

Application for Consideration NJSBBP Scholarship Award

High School Name:

Date Submitted:

High School Address:

Name of Advisor:

Department:

City, State, ZIP:

Telephone Number:

Donor Chairperson:

Graduation Date (Mo/Yr):

Date of Blood Drive(s):

Number of Juniors and Seniors in School:

Successful Donations Collected:

Please answer the following questions on a separate piece of paper and attach it to this application. Please write your name and high school on every page. Answers to each question should be approximately 100 words.

- 1) Why did you volunteer to be the school blood donor chairperson?
- 2) What methods did you use to encourage students to give blood?
- 3) What lessons did you learn from your experience as a donor coordinator?
- 4) If you volunteered again, how would you go about things differently?
- 5) How did your experience as a donor chairperson affect you in a personal way?

Community Blood Center Sponsor:

Please attach a written recommendation and your thoughts on the applicant.

Blood Center Name:

Donor Recruiter:

Address:

Administrator:

City, State, ZIP:

Telephone Number:

Chairperson, please have your Advisor or Guidance Counselor complete the following:

By signing below, I affirm that the aforementioned Blood Donor Chairperson is a student in good standing at the school listed above and deserves to be considered for the NJSBBP Scholarship Award.

Submitted by:

Date:

Print Name:

Position: