

Ancient Order of Hibernians- Joe Cahill Division 10
Billy Briggs Memorial Scholarship 2023
P. O. Box 9952
Hamilton, NJ 08650

DEADLINE for Scholarship applications is Friday, March 22, 2024.

ELIGIBILITY RULES:

- Applicants must be between the ages of 15 to 17 years old, and available from July 18th thru August 9th 2024.
- Applicants, who are currently 17 years old, must not have their 18th birthday before July 18th, 2024.
- Applicants must have a valid passport at the time of the application deadline, with an expiration date of more than 6 months from August 9th, 2024.
- Applicants must attend a school within Mercer County, New Jersey **OR** have a parent or grandparent who is a member of a New Jersey or Bucks County, Pennsylvania AOH/LAOH.
- Scholarship winners must be willing to study and learn basic Irish language in advance of being sent on the trip. Help and learning tools for this will be provided by the Scholarship Committee.
- Scholarship winners must be able to provide their own transportation to PHL, EWR, or JFK airport around July 18th and August 9th 2024.

INSTRUCTIONS:

1. Complete application below.
2. Attach an essay on the topic "My Irish Heritage and What It Means To Me" (a minimum of 2 pages).
3. Mail application **and** essay to: Ancient Order of Hibernians- Joe Cahill Division 10 Billy Briggs Memorial Scholarship at: P.O. Box 9952 Hamilton NJ 08650 or email the application and essay to: scholarship@aohdiv10.org

Application

Please type or print your answers.			
1.	Last Name:	First Name:	
2.	Name exactly as it appears on Passport:		
3.	Passport Date of Issue:	Passport Expiration Date:	
4.	Email Address:		
5.	Mailing Address: Street: _____ City: _____ State: _____ ZIP: _____		
6.	Telephone Number: () _____		
7.	Date of Birth:	Month:	Day: Year:
8.	School Name: _____ Level (please circle): Freshman Sophomore Junior Senior		
9.	Irish Organization or Association (if applicable):		

I certify that I have read and understand the stated requirements of the scholarship award, and that to the best of my knowledge, the information provided on this form is true and correct.

Signature of Scholarship Applicant: _____ Date: _____
 Signature of Parent or Guardian: _____ Date: _____