



## New Jersey Golf Foundation 2026 Peter Famiano Memorial Scholarship Application

### **General Information**

The New Jersey Golf Foundation's Peter Famiano Memorial Scholarship is awarded annually to honor Peter and his dedication to the game. This scholarship will go to a worthy junior golfer who exemplifies the qualities that made Peter the husband, PGA Professional and man that he was...

*Professionalism, Integrity, Volunteerism and a Willingness to Help Others*

This is a \$2,500 annual scholarship (\$10,000 maximum) which is open to college students of any Class year provided they continue to meet the standards set forth by the Scholarship Committee.

### **Application Procedures**

1. Complete the applicant's section and have a PGA Professional attest to your eligibility.
2. Have your parents (or guardian) complete the last section and attach a copy of pages 1 & 2 of their 2024 & 2025 Federal Income Tax Return.
3. Submit a copy of your high school transcript which should include your class rank and/or cumulative Grade Point Average, and your College Board SAT scores.
4. Include a letter describing your volunteerism and reasons you feel that you are a worthy candidate.
5. Return all appropriate forms prior to the application deadline on May 1, 2026.

### **Selection Criteria**

The NJGF Scholarship Committee reviews all applications using the following criteria: Scholarship achievement, qualities of character and leadership, financial need, volunteer history and college board SAT scores.

### **Award Notification**

Scholarship award notifications will be sent out in June of 2026.

## **Questions and Additional Information**

If you have any questions or need any additional information regarding the scholarship, please contact the NJ Golf Foundation at the following address:

NJ Golf Foundation  
811 Rattlesnake Bridge Road, Bedminster, NJ 07921

You may also visit [www.NJGolfFoundation.org](http://www.NJGolfFoundation.org) or email Chris Hunt at [chunt@pgahq.com](mailto:chunt@pgahq.com)

The Famiano Scholarship recipient will be recognized at the Famiano Pro Am at Trump National Golf Club, Bedminster on June 11, 2026.



## 2026 Peter Famiano Memorial Scholarship Application

### Applicant Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

High School: \_\_\_\_\_

Have you received an award or applied for this program before? \_\_\_\_\_ If so, when? \_\_\_\_\_

Other college(s) enrolled in or applying to: \_\_\_\_\_

Anticipated College graduation date: \_\_\_\_\_ College Major/Minor: \_\_\_\_\_

Honors/Activities: \_\_\_\_\_

### Parents/Guardian Information

Father's (Guardian's) Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

2025 Wages/Salaries: \$ \_\_\_\_\_ 2026 Estimate: \$ \_\_\_\_\_

Untaxed Income: \$ \_\_\_\_\_ (Child Support, Welfare, Disability, etc.)

Mother's (Guardian's) Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

2025 Wages/Salaries: \$ \_\_\_\_\_ 2026 Estimate: \$ \_\_\_\_\_

Untaxed Income: \$ \_\_\_\_\_ (Child Support, Welfare, Disability, etc.)

\*Please attach a copy of pages 1 & 2 from your parent's or guardian's 2024 and/or 2025 Federal Income Tax Returns

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

Other Children's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
College (if any): \_\_\_\_\_ Enrollment Date: \_\_\_\_\_

List facility where you play most of your golf: \_\_\_\_\_  
Special Circumstances (if any): \_\_\_\_\_  
Parent's (Guardian's) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Application Deadline: May 1, 2026