NEW JERSEY – NEW YORK FRATERNAL ALLIANCE

2026 YOUTH VOLUNTEER AWARD APPLICATION

Please print or type

Name: _____

Telephone: _____ E-mail: _____Date of Birth: _____

Address: _____

City/State/Zip: _____

Your Fraternal Benefit Society: _____

Civic (non-school) Activities*: _____

_____

Fraternal Benefit Society Activities*: _____

_____

*Information can be submitted on a separate sheet of paper. Please type or print.

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Rules/Regulations/Requirements

Applicant must:

1. Be a current member for at least 1 year of a Member Society of the New Jersey-New York Fraternal Alliance.
2. Be between the age of 16 and 22 at the time of application
3. Obtain a recommendation letter from your Fraternal Benefit Society
4. Sign the *Statement of Application* below
5. Additional documentation may be submitted
6. Return the completed application and letter of recommendation, postmarked no later than **September 1, 2026** to:

Jennifer Stockdale
GBU Life
NJNY FA Youth Volunteer Award Committee
4254 Saw Mill Run Blvd.
Pittsburgh, PA 15227
E-mail: jennifer.stockdale@gbu.org Phone: 412-884-9813

$500 award to the recipient
This is a one-time award
Judging will be done by the Youth Volunteer Award Committee of the NJNY FA
Recipients will be notified by mail and will be recognized at the Alliance's Annual Convention.

STATEMENT OF APPLICATION

I understand that my selection for this award is based upon my answers to these questions; and further that my application is in competition with other eligible persons and that the decision of the NJNY FA is final. This application is completed with my knowledge and consent, and false information will void the award. The information that is provided in this application is true and complete.

_____

Signature of Applicant