Community Foundation of Jackson County Scholarship Application

Applications must be received by August 19, 2024 in the office of your high school counselor.

Date	Please complete the application and print to submit. (Please print on one side only and no
A. Personal Information	staples please)
Name	
Home Address	
Phone	Email Address
Date of Birth	Town & State of Birth
Father's (or Guardian's) Name	
Father's Address	
Father's Job Title & Place of Employment	
Mother's (or Guardian's) Name	
Mother's Address	
Mother's Job Title & Place of Employment	
Other (such as foster care) Name	
Address	

B. Education

Scheduled or prior graduation date from an Indiana	a High School		
Date	High School	gh School	
To what colleges do you plan to apply?			
Planned Major			
Career Interests			
Will you graduate with a General Diploma?	Yes	No	
Will you graduate with a Core 40 curriculum?	Yes	No	
Will you graduate with a Core 40 academic honors	diploma? Yes	No	
Will you graduate with a Core 40 technical honors of	liploma? Yes	No	
C. Activities On the School Activities and Community, Civic, and participated in during your high school years. Indic received. D. Employment			
List all your part time or full time jobs, present to pa	ast, and the number of months at e	each job.	
Are you currently employed? Yes	No		
Employer	How Long?		
Past Employment	How Long?		

E. Financial Resource

The analysis of financial resources available to help fund post-secondary education is one of the factors considered in the Community Foundation of Jackson County scholarship selection process. In an effort to assess the financial need of applicants, we require that all scholarship applicants complete the following.

- 1. Student savings and 529
- 2. Number of siblings

- 3. Age(s) of sibling(s)
- 4. Total number of family members, **including yourself**, who will be attending post-secondary school at least ½ time during the next academic year:
- 5. Attach a copy of the **FIRST AND SECOND PAGE FROM YOUR FAMILY"S MOST RECENT INCOME TAX RETURN** showing your **family's adjusted gross income**.

F. Application Procedure

The following check-off list will assist you in completing the application. Completed applications must be returned to your counselor's office no later than August 19, 2024. A completed application includes:

Application

First and second page of your family's most recent Income Tax Return

Scholarship Opportunity Sheet

School Activities and Community, Civic, and Church Activities Sheets

Signed below by applicant and parent or guardian

Incomplete applications will not be considered for scholarships through the Community Foundation of Jackson County.

An official high school transcript will be provided by your high school counselor.

In addition, two letters of recommendation are required, as follows:

- · A **maximum** of one from a teacher
- · One from an employer, pastor, or family friend

Letters of recommendation may be submitted to:

Scholarship Committee Community Foundation of Jackson County P.O. Box 1231 Seymour, IN 47274

Please note: Recipients of scholarships administered by the Community Foundation of Jackson County will be notified of their award at their high school's honor day.

TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT

Cian shows of Amelia and	Date	
Signature of Applicant	·	
	Date	
Signature of parent or guardian		

G. ESSAY REQUIRED WITH EACH APPLICATION.

In 200 words or less, discuss one of the extracurricular activities in which you have been involved, emphasizing what you learned from this experience. The activity may be a paid or volunteer job, participation in a school club or sports team, or membership in a church organization. Please type the essay using your own thoughts in the space provided below. Please note that spelling, grammar and paragraph structure will be considered in essay scoring.