

United States JCI Senate Foundation Scholarship Application

- **Eligibility:** Graduating high school seniors in the United States, where that state has an active JCI Senate program (see www.usjcisenate.org [under scholarship] for a listing of eligible states). **You must be a U.S. citizen to apply for this scholarship.**
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This package contains information and directions for applying to the United States JCI Senate Foundation Scholarship Program. Each year \$1,000 grants will be awarded to graduating high school seniors in the United States, who plan to continue their education at accredited post-secondary colleges, universities or vocational schools. The number of grants awarded annually will be at the discretion of the United States JCI Senate Foundation. They must be used for educational expenses in the first year of full-time study. Checks awarded will be made out in the name of the recipient and the educational institution of their choice.

Instructions for applying for the US JCI Senate Foundation Scholarship

Please read the following points carefully. **Failure to comply may be cause for disqualification.**

- Submission preference will be in a Microsoft Word compatible format. Typed or neatly hand printed (blue or black ink only) submission will also be accepted.
- Included in this application package are all the necessary forms.
- Supporting documentation of your choice may follow each page as appropriate.
- Reference letters are limited to three (3) with a maximum length of one (1) page each.
- You will receive credit for each reference letter included.
- Your personal statement should be the last page of the application form.
- Your school transcript should be the very last attachment to your application packet.
- Your name must be on the top of each sheet in the package, along with a page numbering system that states "page __ of __". *When using a MS-Word compatible editor, enter you name in the 'Header' section.*
- All materials **MUST** be submitted under one cover. Materials sent in multiple mailings will **NOT** be accepted.
- Your application must be postmarked no later than **January 4, 2019** to the State Scholarship Chairman listed under your state.
- Your application will be evaluated by persons outside of your area so do not use acronyms for items such as; clubs, programs, event, or awards where they are not national programs. Where the name of the item is not self explanatory, include a description. Example: REACH or J. Doe Memorial Award, should include a description such as: St. Thomas Methodist REACH program to feed the homeless, J. Doe Memorial Award for Top Female Tennis player.
- Sign the bottom of the Personal Statement section

• To submit your application package:

Refer to the website www.usjcisenate.org, under the Scholarship section. Locate the state where you live. **The due date is postmarked January 4, 2019.** Some states also have their own Application listed. If your state is not listed you are not eligible. Do not submit the application to any address on the web page except those under the State Scholarship listing section (packages submitted to the wrong address will not be forwarded).

United States JCI Senate Foundation Scholarship Application

1a. Applicant Information

Applicant Name			Date of Application
Applicant Home Address		Applicant e-mail address	
City	State	Zip Code	Phone Number
Name of Applicant's High School			
Are you a U.S. Citizen (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No			

1b. Parent or Guardian Information

Father's Name			Check here if father is deceased <input type="checkbox"/>
Father's Home Address		Occupation	
City	State	Zip Code	Phone Number
Mother's Name			Check here if Mother is deceased <input type="checkbox"/>
Mother's Home Address		Occupation	
City	State	Zip Code	Phone Number
Do you have a Step-Parent or Guardian other than your Parents: <input type="checkbox"/> Yes <input type="checkbox"/> No			

If YES, provide the following information

Parent or Guardian Name

Home Address		Occupation	
City	State	Zip Code	Phone Number

List in chronological order the names of your brothers, sisters or other persons dependent upon your parents for support

Name	Age	Relationship

Name of College or University you plan to attend

Address	City	State	Zip Code
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Have you been accepted to this College or University

Yes (if Yes, attach copy of acceptance letter) No

1c. Applicant's Financial Statement Information

The financial contribution of the applicant toward their own education is an important consideration in awarding this scholarship. The committee does not wish to penalize those students whose industry and careful planning have been a consideration in planning college attendance. **The budget should be based on your first year of education.**

Income

1. Savings to date	1.	_____
2. Expected summer earnings	2.	_____
3. Expected contribution from parents	3.	_____
4. Earnings from part-time work	4.	_____
5. Money from other sources: Include gifts from friends, relatives Education insurance, loans, other Scholarships. Etc.	5.	_____
Total Estimated Income		_____

Expenses

1. Tuition and Incidental Fees	1.	_____
2. room and Board	2.	_____
3. Books and Supplies	3.	_____
4. Clothing	4.	_____
5. Incidental Expenses (Travel, Recreation)	5.	_____
Total Estimated Expenses		_____

Explain any special personal family or financial situation you believe merits consideration:

2. Leadership Positions and Offices

List by name and by year (9, 10, 11,12) leadership positions and offices held, and the approximate time commitment each month for school, church, community and volunteer activities.

Example:

School: Student Council President (12; 2.7 hours/month) ; Yearbook Editor (12; 35 hours/month) ; Basketball Captain (12; 5 hours/month); **Church:** Youth Group President (11; 10 hours/month); **Community:** Hospital Volunteer Coordinator (11, 12 ; 25 hours/month)

3. Memberships

List by name and by year memberships and other participation and the approximate time commitment each month for school, church, community and volunteer activities.

Example:

School: Basketball Team (9, 10, 11; 35 hours/month); Cheerleader (11, 12; 20 hours/month) ; 4-H Club (9, 10, 11, 12: 8 hours/month); **Church:** Youth Choir (10-12; 4 hours/month); **Community:** Hospital volunteer (9, 10; 25 hours/month)

4. Honors and Awards

List by name and by year the honors and awards you have received during high school.

Example:

School: 4-H Gardener of the Year (11); Boys/Girls State (11); National Merit Scholar (12) ; National Honor Society (12) **Church:** Perfect Attendance (9); **Community:** Hospital Volunteer of the Year (11)

5. Employment

List the names and addresses of employers, including family business or self-employment. Indicate whether you worked part-time, during the summer, or full-time: and include the hours you worked on a monthly basis. Example: Mowing Lawns – Summer – 100 hrs total (9); Wal-Mart – Part-time – 80 hrs. (10); Family Farm – Full-time – 160-hrs (11-12)

6. References

You may include up to three (3) letters of reference from educators, clergy, employers, and/or community leaders. References should be attached to this application. **You will receive credit for each reference letter included.**

7. Transcript

A copy of your current high school transcript MUST be included as the last page of your packet.

8. Personal Statement

Write (type or print) a paragraph of 100 to 300 words, indicating your chosen field of college study. State your reasons for this choice. Include pertinent experiences, activities and accomplishments. *This will be the final page of your application.*

9. High School Contact

Fill in the following information completely.

Name of applicants High School		Principal's Name	
City	State	Zip Code	Phone Number

School email address:

**Staple all pages together in the upper left-hand corner.
Be sure you include all references and other attachments.
Each page of your application MUST be numbered in the upper right-hand corner.
Remember to sign the application package at the bottom of the personal statement page.**

To submit your application package:

Refer to the website www.usjcisenate.org, under the Scholarship section. Locate the state and submission address of the state you live. If your state is not listed you are not eligible. Do not submit the application to any address on the web page except those under the State Scholarship listing section (packages submitted to the wrong address will not be forwarded).

Student Name:

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8. **Personal Statement**

Write (type or print) a paragraph of 100 to 300 words, indicating your chosen field of college study. State your reasons for this choice. Include pertinent experiences, activities and accomplishments.

This will be the final page of your application

I certify that the facts contained in this scholarship application are true and correct. The United States JCI Senate Foundation is hereby authorized to verify any information contained in this application. I understand that any falsification of misrepresentation will result in disqualification.

Signature of applicant

Date Signed
