

2019 Scholarship Application



Jack's Ride Scholarship Program

APPLICATION INSTRUCTIONS:

- *I.* **Print your name here:**
- *II.* Print the name of your high school: _____
- *III.* Print the name of your School District: _____
- *IV.* Read the attached application carefully and be sure to answer every question. Incomplete applications will not be considered.
- *V.* **DO NOT submit a picture with your application.**
- *VI.* IMPORTANT An original plus one (1) copy of your entire application, with pages in order, must be returned along with an <u>official</u> original transcript plus one (1) copy. Please see page 2 for address. In lieu of paper copies, the complete application packet may be emailed to: info@jacksride.org
- *VII.* Scholarship recipients will be notified individually by phone and mail, so be sure to fill out <u>Personal</u> <u>Information</u> correctly.

Scholarship Overview

The Jack's Ride Scholarship Fund will present five (5) \$1,000 scholarships, totaling \$5,000, to qualified graduating high school students. The application period runs **through June 30, 2019**.

Scholarships will be awarded as a one-time disbursement (non-renewable, non-transferable) to each recipient. Funds will be paid by Jack's Ride to the school of the recipient's choice upon evidence of full-time enrollment. Recipient must be planning to attend an accredited 4-year college or university, 2-year community college or trade or vocational school. Scholarship funds may be used for books, tuition and miscellaneous school expenses.

Selection Process

A scholarship committee comprised of the Board of Directors of Jack's Ride will determine final selections. All decisions will be final. Selection criteria include applicant's academic achievements, demonstration of school leadership and participation, community service, three letters of recommendation and an essay from the student. *(see Scholarship Requirements)*



Scholarship Requirements

(Please Read Carefully)

Scholarship applicants must meet the following eligibility requirements:

- 1. Applicant must be a graduating high school student.
- 2. Applicant must maintain a cumulative minimum GPA of 3.0 on a 4.0 scale in high school. Transcripts through Fall 2018 will be required with the application. *Please submit one original plus one (1) copy of your most recent transcript along with one original plus ome (1) copy of your application. The transcript can either be mailed by the school directly to Frank Dragna, or you may have the sealed transcript from the school included in your mailed application.*
- 3. Applicant will be judged based on, but not limited to, weighted averages of the following criteria:
 - A. Academic Achievement
 - 1. GPA
 - 2. Class Rank (as of the end of the Fall semester)
 - 3. SAT/ACT scores (If transcript does not display scores for each of the three parts of the SAT, please submit documented proof of scores.)
 - B. Character
 - C. Leadership
 - **D.** Community Involvement
 - *E.* Three letters of recommendation. One from each of the following:
 - 1. Teacher
 - 2. Administrator, sponsor, coach, or employer
 - 3. Personal

Applicants <u>must</u> use attached sheets.

- F. A letter from your attending physician verifying your medical history and current medical situation
- G. An Essay. A handwritten essay in black ink only is required from the student addressing "What being a cancer survivor has taught me." Essay must be 250 words or less. Applicants <u>must</u> use attached sheet.
 U. Signad release form (attached)
- *H.* Signed release form(attached)
- 4. If selected as a finalist, the applicant may be required to participate in a personal interview.
- 5. All applications must be submitted (or postmarked) no later than June 30, 2019 :

Jack's Ride Scholarship Program Attn: Frank Dragna 8322 Cedarbrake Houston, Texas 77055 email: info@jacksride.org

6. If you have any questions, please contact Frank Dragna at 832.498.5096.

Jack's Ride officials and their immediate family members are not eligible for scholarships.



Jack's Ride Scholarship Application

Please Type or Print Clearly

Personal Information:	
Name of Student:	SS#:
Home Address:	
City, State & Zip:	
Parent(s) and/or Legal Guardian(s) Full Name(s):	
Educational Information:	
High School:	
School District:	
High School Cumulative Grade Point Average:	
ACT Score: SAT Score:	PSAT Score:
If transcript does not display scores for each of the three	parts of the SAT, please submit documented proof of sc
Class Rank: out of	
Name of College Student Plans to Attend:	
Intended Academic Major:	
Career Plans:	
Future Occupation:	

All applicants will receive consideration for the Jack's Ride Scholarship Program without regard to sex, race, color, national origin or ancestry, religion, age, handicap, or marital status.

Please return completed forms to the Jack's Ride Scholarship Program at 8322 Cedarbrake, Houston, Texas 77055; Attn: Jack's Ride c/o Frank Dragna email:info@jacksride.org

Honors and Awards



Student Name: ______
High School: _____

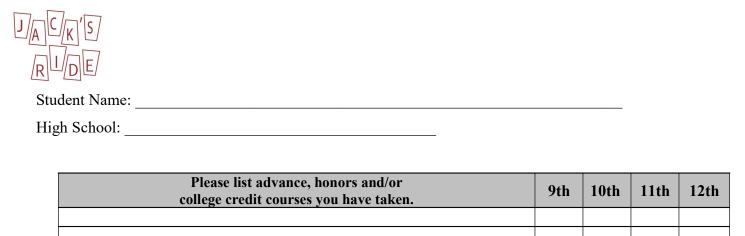
Honors & Awards	Please Explain	9th	10th	11th	12th

Employment	Hours*	Please Explain	Employment Period
	Wk / Mo / Yr		
	Wk / Mo / Yr		
	Wk / Mo / Yr		
	Wk / Mo / Yr		
	Wk / Mo / Yr		

*Please indicate number of hours and circle the appropriate time period.

If you need additional space, please photocopy this page.

School Activities



			_			
School Activities	Hours*	Leadership	9th	10th	11th	12th
School Activities	liouis	Positions) Jui			120
	Wk / Mo / Yr		_			
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk/Mo/Yr					
	Wk/Mo/Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					

*Please indicate number of hours and circle the appropriate time period.

If you need additional space, please photocopy this page.

Community Service



Student Name:

High School:

Community Service	Hours*	Leadership Positions	9th	10th	11th	12th
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	Wk / Mo / Yr					
	······································					
	Wk / Mo / Yr					

*Please indicate number of hours and circle the appropriate time period.

If you need additional space, please photocopy this page.

Please return completed forms to the Jack's Ride Scholarship Program at: 8322 Cedarbrake Houston, Texas 77055 Attn: Jack's Ride Scholarship Program c/o Frank Dragna

email: info@jacksride.org

Thank you for your interest in the Jack's Ride Scholarship Program. We wish you success in all your future endeavors.

Teacher's Recommendation



Name of Student:

Your recommendation should address why you feel this student deserves a Jack's Ride Scholarship. Please list specific examples of work ethics, personality traits, accomplishments, and other examples of behavior that makes this individual unique. *If you are attaching a letter, please staple it to this sheet and sign below.*

Teacher's Signature: _____

Print Name: _____

If you need more space, please use reverse side of page.

Administrator, Sponsor, Coach or Employer's Recommendation



Name of Student:

Your recommendation should address why you feel this student deserves a Jack's Ride Scholarship. Please list specific examples of work ethics, personality traits, accomplishments, and other examples of behavior that makes this individual unique. *If you are attaching a letter, please staple it to this sheet and sign below.*

Signature:

Title:

If you need more space, please use reverse side of page.

Personal Recommendation



Name of Student:

Your recommendation should address why you feel this student deserves a Jack's Ride Scholarship. Please list specific examples of work ethics, personality traits, accomplishments, and other examples of behavior that makes this individual unique. *If you are attaching a letter, please staple it to this sheet and sign below.*

Signature:

Relationship:

If you need more space, please use reverse side of page.

Statement from the Student



Instructions: Write an essay on "What being a cancer survivor has taught me." (250 words or less). You must complete the essay in your own handwriting using a black ballpoint pen. You may write in the space provided below and on the reverse side of this page if necessary.

Student's Signature.
Student's Signature:
Print Name:
If you need more space, please use reverse side of page.
If you need more space, please use reverse side of page.



Jack's Ride is a Non-Profit, Tax-Exempt, Publicly Supported Organization with IRS 501(c)(3) status. EIN 27-4487123

As the recipient of a Jack's Ride Scholarship, I agree to have my name and photo published in the news media and my name, photo and success story to be published on www.jacksride.org website, newsletters, brochures, speeches or any other promotional material.

Applicant's Name (Print)_____

Applicant's	Signature
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Date

Complete this portion if the applicant is a minor:

As the parent/guardian of the applicant I agree that if he/she is the recipient of the scholarship that his/her name and photo may be published in the news media and his/her name, photo and success story to be published on www.jacksride.org website, newsletters, brochures, speeches or any other promotional material.

Parent/Guardian Name (Print)

Parent/Guardian's Signature _____

Date_____