

Scholarship Application

Applicants must have at least a 2.5 GPA and in need of Financial Aid

Please type or print your answers. If application is illegible it will not be considered.				
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1.	Last Name:	First Name:		
2.	Mailing Address			
	Street:			
	City:	State:	ZIP:	
3.	Daytime Telephone Number:			
4.	Email Address:			
5.	Date of Birth (mm/dd/yyyy):			
6.	High School presently attending:			
7.	Grade Point Average (on a 4.0 scale):			
	A recent official school transcript is required.			
8.	Anticipated graduation date:			
9.	I will be attending the following school in the Fall of _			
	Name:			
	Address:			
	City/State/ZIP:			
	Proof of acceptance or current student enrollment from the ab	ove school is required prior to	receipt of funds.	
10.	What is your intended major in college?			

11.	List any academic honors, awards and membership activities while in high school.
12.	List other financial assistance you will receive.
	A. Personal
	B. Grants
	C. Student Loans
	D. Other Financial Resources:
	E. Other Scholarships (list below):
Any a	additional comments or facts you would like to be considered may be detailed below.
	Statement of Accuracy
I herel	by affirm that all of the above stated information provided by me is true and correct to the best of my knowledge. I also
conse	nt that my picture may be taken and used for any purpose deemed necessary to promote the scholarship program.
Signat	ure of scholarship applicant: Date:

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