

JESSIE KLUCKA FOUNDATION SCHOLARSHIP APPLICATION - 2022

P.O. Box 1518

Carlsbad, CA 92018

(760) 822-3434 email: jessiekluckafoundation@gmail.com

TO: High School Counselor

Please give us your cooperation in submitting qualified applications for your deserving students by **March 31, 2022**. (Applications postmarked after March 31, 2022, will not be considered).

OUR REQUIREMENTS:

- San Diego City or County High School Seniors Only – Currently attending
- Medium to outstanding grades
- Extracurricular activities
- Family financial need
- Complete information on **our** forms
- Student to attend community college with intent to transfer to 4-year college or attend 4-year college or university

We will accept no more than TWO (2) applications per high school and must be accompanied by counselor letter of recommendation.

Please see that each application includes the following:

- Scholarship Application – Filled out by applicant
- Income and Expense Statement – reflecting **parent(s) or guardian** monthly income
- Personal Profile - reflecting **parent(s) or guardian** financial status
- Counselor Letter of Recommendation
- Confidential Report on Applicant – filled out by counselor or principal – **Attached - Do Not Send Separately.**
- High School Transcript

We will be awarding scholarships between \$1,000 and \$3,000. These awards will be renewable for three additional years, depending upon scholastic standings. Please assist us in the granting of funds to these graduating students by complying with our foundation policies. We appreciate your efforts!

JESSIE KLICKA FOUNDATION
2022 SCHOLARSHIP APPLICATION
P.O. Box 1518
Carlsbad, CA 92018
(760) 822-3434 email: jessieclickafoundation@gmail.com:

	PERSONAL INFORMATION:
1.	Last Name: _____ First Name: _____
2.	Home Address: Street: _____ City: _____ State: _____ Zip: _____
3.	Telephone Number: _____
4.	Social Security Number: (Must be furnished if awarded scholarship)
5.	Date of birth: _____
6.	Email address: _____
7.	Are you a U.S. Citizen? _____
8.	High School Currently Attending: _____
9.	GPA: _____
10.	Name, address and phone numbers of parent(s) or legal guardian: (Include address if different than your own) Father's Name: _____ Mother's Name: _____ Or Name of Legal Guardian: _____ Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____ With Whom Do You Live (Name and Relationship): _____
11.	Number of Children in Family: _____ Ages of Children: _____
	FINANCIAL INFORMATION:
1.	List Family or guardian Gross Annual Income from your 2021(or 2020 return if not filed yet). Income Tax Form 1040: \$ _____ (Information supplied will be kept confidential)

2.	Attach page 1 of 2021 IRS Income Tax Form
	SCHOLARSHIP INFORMATION
1.	How do you plan to cover your expenses? <input type="checkbox"/> Money furnished by family <input type="checkbox"/> Earnings during summer/school year <input type="checkbox"/> Grants (FAFSA/other?) <input type="checkbox"/> Scholarships (complete #2 below) <input type="checkbox"/> Other (Please describe)
2.	Are you the beneficiary of any other scholarship awards(s)? Please list name and amounts:
3.	Have you applied for any other scholarships? Please list:
	RESUME/ACTIVITIES: (If you have a resume or activities sheet that answers questions 1,2, 3, and/or 4, please attach)
1.	List any academic honors, awards and membership activities while in high school:
2.	List your hobbies, outside interests, extracurricular activities and school related volunteer activities:
3.	List non-school sponsored community service or church groups you are affiliated with:
4.	What work experience have you had?
	COLLEGE PLANS:
1.	If you have decided on what college you will attend, please list school name and address: College or university name: Address: If attending a community college, name of 4-university where you plan to transfer:

2.	If not, list your top 3 college choices:
3.	Attach a detailed list of estimated college expenses. Please include financial aid award offer from college or university.
	<p>ESSAY: (Please attach a typewritten statement – no award will be made if omitted).</p> <p>Why have you chosen this college or university and course of study? Please include information regarding transfer plans to 4-year university and any other information, personal or otherwise, you think would be helpful to the foundation when considering your application.</p>

Your signature: _____

Date: _____

ATTACH ESSAY HERE

JESSIE KLIKA FOUNDATION

CONFIDENTIAL REPORT ON APPLICANT – 2022

(to be filled out by Counselor)

Counselor: **ATTACH** this completed form **and** letter of recommendation to the application. Include any information you may have regarding his or her personal situation in your letter. **(Applications without letter of recommendation will not be considered)**

Name of Applicant: _____
First Middle Last

Address: _____
Street

City State Zip Code

1. How long has the applicant been a student at your school? _____

2. On what do you base your estimate of the applicant? (Please check)

Personal acquaintance _____ School records _____ Instructor Reports _____

3. Has the applicant maintained a definite and sincere interest in his or her studies, at all times, while in your school? _____

4. If not, has recent improvement in attitude toward study led you to believe he or she would carry college work successfully? _____

5. Was the applicant one of the leaders in some recognized extracurricular activity in your school? _____ What? _____.

6. To what extent do you believe applicant or applicant's family is able to finance his or her college education? Please check:

All _____ Part _____ Not at all _____ No information _____

Printed Name: _____

Signature: _____ Date: _____
Counselor or Principal

School: _____

Email Address: _____

Phone Number: _____

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SCHOLARSHIP APPLICATION 2022

MONTHLY INCOME AND EXPENSE STATEMENT OF PARENT(S)/GUARDIAN

Applicant Name: _____

Name of Parent(s) or Guardian _____

Employed at: _____

MONTHLY INCOME		MONTHLY PAYMENTS	
Father/Guardian	\$	Rent or Mortgage Payment	\$
Mother	\$	Car Payments	\$
Unemployment, Welfare, Disability, Social Security	\$	Insurance Premiums (auto, health, dental, life payment)	\$
Investments	\$	Alimony Payment	\$
Alimony	\$	Child Support Payment	\$
Child Support	\$	Living Expenses (food, utilities, clothing, etc)	
Other (Pension or retirement)	\$	Other	\$
Total	\$	Total	\$
		Taxes:	
			\$
		Property Taxes	\$
		Other:	\$
		Total	\$

IF SELF EMPLOYED, MUST BE ACCOMPANIED BY COPY OF LAST TAX RETURN

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SCHOLARSHIP APPLICATION 2022**

FINANCIAL PROFILE OF PARENTS OR GUARDIAN

Name of Applicant: _____

Parent/Guardian Name: _____ Spouse: _____

Address: _____

City _____ State: _____ Zip Code: _____

Phone Number (____) _____

ASSETS		LIABILITIES	
Cash in Financial Institutions	\$	Balance of all Credit Cards	\$
Investments (non-real estate)	\$		\$
Securities	\$	Owed on Vehicles	\$
Life Insurance (Cash value)	\$	Home Balance	\$
Vehicles		Other Real Estate	\$
Yr ____ Make ____	\$		
Yr ____ Make ____	\$		
Home Value	\$	Furniture	\$
Other Real Estate	\$	Other Debts	\$
Furniture Value	\$		\$
Miscellaneous (list)	\$	Miscellaneous	\$
	\$		\$
	\$		\$
401(k), Pension or Profit Sharing Plan	\$		\$
TOTAL ASSETS	\$	TOTAL LIABILITIES	\$
	Total Assets	\$	
	Total Assets Minus Total Liabilities	\$	
	Total Net Worth	\$	

Checklist:

- _____ Application
- _____ Tax Return
- _____ List of College Expenses
- _____ Essay
- _____ Confidential Report of Applicant by Counselor
- _____ Monthly Income and Expense Statement of Parent(s) or Guardian
- _____ Financial Profile of Parents or Guardian
- _____ Counselor Letter of Recommendation
- _____ High School Transcript

MAIL COMPLETED APPLICATION PACKAGE TO:

**Jessie Klicka Foundation
P.O. Box 1518
Carlsbad, CA 92018**

If you have questions, call 760-822-3434.

Reminder:

The deadline for this application is March 31, 2022. Must be postmarked by this date!