## 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 <a href="www.usjcisenate.org">www.usjcisenate.org</a> [under scholarship] or <a href="www.usjcisenatefoundation.org">www.usjcisenatefoundation.org</a> for a listing of eligible states). You must be a U.S. citizen to apply for this scholarship.

This package contains information and directions for applying to the United States JCI Senate Foundation Scholarship Program. Each year (April) \$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. Your application packet pages must be submitted in order as listed below. **Failure to comply may be cause for disqualification.** 

C 1	Ameliana Tufannasian
Section 1	Applicant Information
Section 2	Financial Statement
Sections 3-5	Leadership Positions & Offices / Memberships / Honors and Awards
	You may include additional sheets to continue the information for these areas as needed
Sections 6-7	Employment / School Contacts
	You may include additional sheets to continue the information for these areas as needed
Section 8	Personal Statement (100 to 300 words)
Section 9	Continuation Pages for section 3-7 (if applicable)
Section 10	College or University Acceptance letter (if applicable)
Section 11	Supporting documentation of your choice (awards, certificates, articles, pictures, etc)
Section 12	Reference Letters
Section 13	Transcripts (grades and state test scores)
Section 14	Signature

- Your personal statement is limited to 300 words. Any more than 300 words will not be judged.
- Reference letters are limited to three (3) letters with a maximum length of one (1) page (one side only) each. You will receive credit for each reference letter included.

Your school transcript should be the very last attachment to your application package.

Sign the bottom of the Personal Statement section

Your name must be on the top of each sheet in the package, along with a page number.

When using a MS-Word compatible editor, enter you name in the 'Header' section.

Each student must have an active, working email address listed.

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 15, 2016** 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.

Do not include these first two pages of instructions in your reply.

By submitting your application you agree that your name may be used as part of the public relations of the US JCI Senate program, the US JCI Senate Foundation and the US Junior Chamber of Commerce and their affiliates such as their associated state programs

## To submit your application package:

Dale Hill 265 Marble St., #105 Broomfield, CO 80020 (303) 466-1192 dlh.coloradoroadrunner@hotmail.com

Student Name:		····-	Page: 3
) Un	ited States JC	l Senate Fou	ndation
<b>5</b>		p Applicatio	
1. Applicant Information			
Applicant Name			Date of Application
Applicant Home Address		Applicant e-mai	l address
City	State	Zip Code	Phone Number
Name and Mailing Address of Applica	l ant's High School		
Are you a U.S. Citizen (check one)	Yes N	lo	
1b. Parent or Guardian Inform			-
Father's Name			Check here if father is deceased
Father's Home Address		Occupation	
City	State	Zip Code	Phone Number
Mother's Name	··········		Check here if Mother is deceased
Mother's Home Address		Occupation	<del></del>
City	State	Zip Code	Phone Number
Do you have a Step-Parent or Guard	ian other than your Parent	s: Yes No	
If YES, provide the following informa Parent or Guardian Name	tion		
Home Address		Occupation	·
City	State	Zip Code	Phone Number
List in chronological order the names	•	r other persons depend Age	lent upon your parents for support  Relationship
<del></del>			
Name of College or University you pl	an to attend		
Address	City	State	Zip Code

Have you been accepted to this College or University

Yes (if Yes, attach copy of acceptance letter)

No

Student	Name:				Page:
2. Applica	nt's Financial Statement Information				
The financial The committe	contribution of the applicant toward their own education ee does not wish to penalize those students whose indus dance. The budget should be based on your first year of	stry and	careful	planning have been a consideration	on in planni
ncome					
	1. Savings to date	<sub>-</sub> 1	\$	0.00	
	2. Expected summer earnings	2	\$	0.00	
	3. Expected contribution from parents	3	\$	0.00	
	4. Earnings from part-time work	4.	\$	0.00	
	<ol> <li>Money from other sources:</li> <li>Include gifts from friends, relatives</li> <li>Education insurance, loans, other</li> <li>Scholarships. Etc.</li> </ol>	5.	\$	0.00	
	Total Estimated Income		\$	0.00	
xpenses					
	1. Tuition and Incidental Fees	1	\$	0.00	
	2. room and Board	_ 2	\$	0.00	
	3. Books and Supplies	3	\$	0.00	
	4. Clothing	4	\$	0.00	
	5. Incidental Expenses (Travel, Recreation)	5	\$	0.00	
	Total Estimated Expenses		\$	0.00	
xplain any s	special personal family or financial situation you believe	merits o	onsider	ation:	
				*	
			_		

	tudent Name:	Page: 5
3. 1	Leadership Positions and Offices	
- 1	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 Council President (12; 2.7 hours/month); Community: Hospital Volunteer Coordin (25 hours/month)	aptain ( 12 ator (11, 12
	lemberships	
n	ist by name and by year memberships and other participation and the approximate time commitment each nonth for school, church, community and volunteer activities.  xample:	
S	chool: Basketball Team (9, 10, 11; 35 hours/month); Cheerleader (11, 12; 20 hours/month); 4-H Club (9, 10, 1 ours/month); Church: Youth Choir (10-12; 4 hours/month); Community: Hospital volunteer (9, 10; 25 hours/month)	1, 12: 8 onth)
_		
Н	lonors and Awards	
	ist by name and by year the honors and awards you have received during high school.	
	xample:	
N	chool: 4-H Gardener of the Year (11); Boys/Girls State (11); lational Merit Scholar (12); National Honor Society (12) Church: Perfect Attendance (9); Community: Hospital ne Year (11)	Volunteer (

Student Name:			P	age: 6
6. Employment				
List the names and addresses of en Indicate whether you worked part-	ime, during the summe	er, or full-time: and inc	loyment. ude the hours you worked on a mont ime – 80 hrs. (10); Family Farm – Fu	hly ill-time
	<u>.</u>		<u></u>	
V V				
2000 State				
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			×	0
	900			
				-
7. High School Contact				
Fill in the following information comp	letely.			
Name of applicants High School		Principal or Cou	nselor Name	
Address & City	State	Zip Code	Phone Number	
School email address of Principal or	Counselor:			

3.		Personal Stater	nent	
			your chosen field of c	college study. State your reason
				4)
. Continuation Pag	es from section 3-	7 (if applicable)		
. Continuation Page 0. College or Unive	ges from section 3- rsity Acceptance let	7 (if applicable) ter (if applicable)		
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Student Name:

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 (above)

## To submit your application package:

Refer to the website <a href="www.usjcisenate.org">www.usjcisenatefoundation.org</a>, 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 <a href="State Scholarship listing section">State Scholarship listing section</a> (packages submitted to the wrong address will not be forwarded).

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