

Jules of Life Scholarship Application

APPLICATION REQUIREMENTS

The Jules of Life Foundation Scholarship requires the submission of the following by the annual deadline date of May 5th:

- Application
- Personal Statement - ESSAY (Section Four of Application)
- An unofficial copy of your high school transcript (Section Two of application)
- A copy of your SAR (Student Aid Report) (Section Two of application)

Please speak with your guidance counselor, if you have any questions or issues with the application, transcript or EFC

MAIL APPLICATION

Print application, complete, attach unofficial copy of your high-school transcript, copy of your SAR and any other form required, and mail to:

Carmen Gendebien
c/o Jules of Life Foundation
798 Five Mile Line Road
Ogdensburg, NY 13669

QUESTIONS

If you have any questions about the application or scholarship process, please contact your guidance counselor. If you still have further questions, please contact Carmen Gendebien at (315) 854-0072.

Application

SECTION 1

Student Information

PERSONAL INFORMATION

FIRST NAME		LAST NAME		
STREET ADDRESS		CITY	STATE	ZIP
PHONE NUMBER		CELL PHONE		
DATE OF BIRTH	SOCIAL SECURITY NUMBER		GENDER	
E-MAIL ADDRESS		PARENT(S) NAME		

SCHOOL INFORMATION

NAME OF SCHOOL CURRENTLY ATTENDING	SCHOOL YOU WILL BE ATTENDING IN THE FALL
THE SCHOOL YOU WILL BE ATTENDING IS A: <input type="checkbox"/> 2 Year Community College <input type="checkbox"/> 4 Year College/University <input type="checkbox"/> Trade/Vocational <input type="checkbox"/> Other _____	
DEGREE YOU WILL BE PURSUING <input type="checkbox"/> Associate <input type="checkbox"/> Bachelor <input type="checkbox"/> Certificate <input type="checkbox"/> Other _____	
INTENDED MAJOR	

SECTION 2

Financial Information

- Please contact your guidance counselor, if you have any questions regarding your Financial Information unofficial high school transcript or your SAR
- Please enclose an unofficial copy of your high school transcript
- Please enclose a copy of your SAR (Student Aid Report)

(Continued)

FINANCIAL INFORMATION, *continued*

Have you received a scholarship in the past? Yes No

Please list the name and amount of each scholarship, grant or financial aid for which you have already applied for or are planning to apply for this year:

_____	_____
_____	_____
_____	_____

SECTION 3

Activity and Awards Information

EXTRA-CURRICULAR ACTIVITIES

Please list any extra curricular activities you have been involved in for the past four years. This can include general extra-curricular activities, community service, or work experience.

	START DATE, END DATE	AVG. HOURS PER MONTH	DESCRIPTION
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

(Please list additional activities on a separate sheet)

AWARDS AND HONORS

Please list any awards and/or honors you have received in the past four years:

	MONTH/YEAR	AWARD/HONOR
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

(Please list additional awards and honors on a separate sheet)

SECTION 4

Personal Essay

Please type the words **“Personal Statement”** at the top of the first page, along with your first and last name. Your personal statement should be no more than two pages, typed, single or double spaced, with 10 or 12-point type and one-inch margins. Any additional pages will not be considered.

Clearly address at least one (or more if desired) of the following questions in your essay:

- What is your career goal and why have you chosen this path?
- What individual or event has influenced you and why?
- What personal obstacle have you faced and how did you overcome it?
- Name an accomplishment that is a source of pride for you.

Certification, Terms and Conditions, and Release

APPLICANT CERTIFICATION

I certify that the information provided in this application is, to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that could otherwise jeopardize consideration of this application.

AGREEMENT OF TERMS

I understand that if I do not submit the information required for this application, if it arrives late, or if my application is incomplete, it will not be considered. I understand that if I am selected as the recipient of the Jules of Life Scholarship, that I agree to adhere to all of the following terms and conditions of my scholarship or risk losing the award:

- Maintain a GPA of at least 2.5 per semester or risk losing award
- Responsible for forwarding an annual transcript to the Jules of Life Committee Chair, Carmen Gendebien, by the end of each school year (June/July) without fail or lose award
- The entire \$1000.00 of the scholarship will be provided to you in your first year of college attendance for the purpose of going towards your books, tuition, meal plans, etc. throughout the school year.
- If the student decides to leave school to pursue the work force and later decides to return to school the scholarship would not be available any longer.

PRESS AND MEDIA RELEASE

If selected to receive the Jules of Life Foundation Scholarship, I authorize the Jules of Life Scholarship Committee to use my name, photograph and any other information for press and media purposes.

Yes, I authorize the Jules of Life Foundation use of my name and photograph

No, I **do not** authorize the Jules of Life Foundation use of my name and photograph

SIGNATURES

SIGNATURE OF APPLICANT	DATE
NAME OF PARENT/GUARDIAN	DATE
SIGNATURE OF PARENT/GUARDIAN	DATE