

BEN JACKSON MEMORIAL SCHOLARSHIP

Application for Scholarship



Guidelines: The purpose of this scholarship to honor the memory of Ben Jackson by awarding \$1,000 scholarships to graduating seniors in the Thomasville area. Considerations for the scholarship award shall include personal leadership, academic records, and moral character.

Name of High School: _____

Last Name: _____ First: _____ Middle: _____

Address: _____ City, State, Zip: _____

Parent/Guardian: _____ Work Phone: _____

Home Phone: _____ DOB _____ M or F (circle one) SS# _____

High School CUM GPA: (check one) A (90-100) B (80-89) C (70-79)

Have you applied to College/tech School? Yes No Have you been accepted? Yes No

Where? _____

If no, where do you plan to attend? _____

Have you taken the SAT? Yes No Score _____ Have you taken the ACT? Yes No Composite _____

Briefly, name athletics, activities and clubs in which you have participated in high school, the local community, and the local church:

Briefly, list position of leadership and awards you have held/achieved in school clubs, athletics, the local community, and the local church:

Write at least one clear, specific paragraph explaining why you are requesting this scholarship and why you believe you should receive this scholarship. Also, please attach one recommendation from your local minister, teacher, and etc. describing your leadership capability and personal character. Attach both sheets to this form. Please include a copy of your college acceptance letter.

Signed _____ Date _____