

**WHO CAN APPLY:** Scholarships of \$1,000 are available to graduating **high school seniors** attending college/technical school in the fall of 2022 whose employer or parent's employer is a member of the Jefferson City West Side Business Association.

## **SCHOLARSHIP APPLICATION**

Application Deadline: Applications should be mailed to the above address, and MUST be postmarked no later than **April 1, 2022.** This application must be typed or printed in black ink.

# **Personal Information:**

Last Name	First Name		Middle Name	
Street Address	City		Zip Code	
Your Primary Phone #		Parent's Phone #		
Your Email		Parent's email		
Your Employer (if any)		High School You Are Attending		
Father's Name		Employer		
Mother's Name		Employer		
Activities/College Plans:				
Where do you plan to attend college:				
Have you been admitted: ☐ Yes ☐	No Month/Ye	ear you plan to attend:		
Probable college major:				
Career Goal:				

Significant school activities, leadership positi	ions and offices held, letters earned, etc.
Out of school activities (church, scouts, volume	nteering, etc.)
Scholarships Documentation	
List the names and amount(s) of other scholarships you and Bright Flight eligibility.	ou have received. Please include institutional scholarships
1	<b>\$</b>
2	\$
3	<b>\$</b>
4	<b>\$</b>
5	<b>\$</b>
6	<b>\$</b>

### <u>Essay</u>

Compose a statement of not more than 200 words explaining your goals for the future and your professional ambitions. How will this scholarship help you to achieve your goals? Attach the essay to the back of this application.

<u>Letter of Recommendation</u>
Submit one letter of recommendation by an outside individual <u>other</u> than a school representative or relative.

Attach the letter to the back of this application.

	is submitted for <b>confidentia</b> ed by your parent or guardiar	<b>l</b> use by the selection committed. Indicate your family's gross	
Less than \$25,000	\$40,000-\$59,000	\$80,000-\$99,000	\$150,000 PLUS
\$25,000-\$39,000	\$60,000-\$79,000	\$100,000-\$149,000	
<u>List names and ages o</u>	f dependents as reported	l in your parent's federal	income tax form:
		aps involving expense ee should take into col	
		Signature of Pa	rent/Guardian

# TO BE COMPLETED BY COUNSELOR:

Student's G.P.A	Class Rank: o	f		
ACT Composite Score	SAT Score	Verbal	Math	
Do you believe the education	plans of this student are realist	ic?		
Counselor Recommendation:				
To the best of my knowledge,	the statements made by the sta	udent on this scholarsh	ip application are corre	et.
Signature of Counselor		Date		