J.P. Hall, Sr. Children’s Charities

Guidelines for Scholarship

Purpose

To assist deserving high school graduates who wish to pursue higher education at St. Johns River State College or the University of North Florida. Scholarships are need-based for students who have limited financial resources and the potential for collegiate study.

# Eligibility

Graduating senior students of a Clay County public high school with a demonstrated need for financial assistance meeting the following criteria:

1. Must be a resident of Clay County.
2. Attendance – no more than five unexcused absences per year.
3. Must be drug free in high school and during the term of the scholarship.
4. Must be free from disciplinary action both in school and community.
5. Academically, must have a cumulative GPA of at least 2.5 in high school. If awarded a scholarship, must maintain a GPA of 2.5 each semester.
6. Must be willing to volunteer ten (10) hours working with the J.P. Hall Children’s Charities.
7. Must attend the college to which the scholarship has been granted in the fall following high school graduation.
8. Students attending college must not exceed more than $3000.00 in financial assistance from other sources.
9. Students must submit a completed application. Partially filled out applications will not be considered.

# Selection

Selection will be based primarily on the student’s financial need. Academic standing, extracurricular activities, community service, and other financial assistance the applicant already may have received will be considered.

All decisions by the Scholarship committee are final.

# Awards

Awards, in varying amounts, to be used as partial tuition at St. Johns River State College and the University of North Florida.

# Terms

Scholarship funds will be sent directly to the college chosen by the student and will be deducted from the registration and tuition costs upon enrollment. If the student is receiving a full scholarship to St. Johns River State College, the scholarship will pay up to twelve credit hours per semester for two years.

The scholarships may not be transformed to another college. If the student elects to attend a different college, all scholarship funds are forfeited.

Directions for Submitting Application for Scholarship

1. Attach a copy of your high school transcript including SAT and/or ACT scores and three (3) letters of recommendation, including one from your high school guidance counselor.
2. Attach a brief essay, not less than 300 words, not to exceed 600 words. The essay must include the applicant’s name on each page. (The average, double spaced typed page equals approximately 287 words.) Choose one of the following topics for your essay:

 I. Why I will succeed in life, both personally and professionally.

 II. Who has had the most influence on my life, and why?

1. Complete the application in full and attach a recent photo of the applicant and the essay.
2. Submit the completed application to your guidance counselor.

The counselor must forward completed applications to:

J.P. Hall Children’s Charities

P.O. Box 395

Green Cove Springs, FL 32043

 Or may be dropped off to:

 Mr. Ronnie Robinson 3170 US Highway 17

 Green Cove Springs, FL 32043

Applications must arrive no later than March 15, 2019.

1. Finalists will be called for an interview. All decisions of the Scholarship Committee are final.
2. Your application will be considered incomplete and will be disqualified if any of the following items are missing:

 \_\_\_ Completed Application \_\_\_ Photograph of the Applicant

\_\_\_ High School Transcript \_\_\_ Essay written by the applicant

\_\_\_Letters of Recommendation

# J.P. HALL, SR. CHILDREN’S CHARITIES OF CLAY COUNTY 2019 SCHOLARSHIP APPLICATION

**INSTRUCTIONS:** Please type or print and fill out using black ink. Fill out application completely. Incomplete applications will NOT be considered.

**A. Date of Filing**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## B. Application Information

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Last) (First) (Middle)

Preferred to be called: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Number and Street)

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP Code: \_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## C. Family Information

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Mother’s name) (Father’s name)

 Parents: (Circle all that apply) Married Separated Divorced

With whom do you live with? Mother Father Guardian Step-Parent Grandparent

Father’s Occupation and Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Occupation and Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family Annual Income: \_\_\_\_\_ Up to $25,000 \_\_\_\_\_ $25,000 - $40,000

\_\_\_\_ $40,000 - $65,000 \_\_\_\_\_ $65,000 - $90,000 \_\_\_\_\_ $90,000+

Number of brothers/sisters and age of each: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other siblings attending college: (age and college) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have another family member who has applied in the past or is applying this year for this scholarship? Who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ What Percentage of college cost will be paid by:

 Yourself\_\_\_\_\_\_\_\_\_ Parents\_\_\_\_\_\_\_\_ Other (specify)\_\_\_\_\_\_\_

Are you or your parents participants in the Florida Prepaid College Program? Yes\_\_\_ No\_\_

If yes, please describe the program in which you are registered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What college do you plan to attend?

St. Johns River State College \_\_\_\_\_\_ University of North Florida \_\_\_\_\_\_

**D.** Academic Information (To be filled out completely) Transcript required from your guidance counselor.

Name of High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of your guidance counselor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High school GPA year by year: 9th \_\_\_\_\_\_ 10th \_\_\_\_\_\_ 11th \_\_\_\_\_\_\_ 12th \_\_\_\_\_\_\_

Cumulative GPA \_\_\_\_\_\_\_ ACT \_\_\_\_\_\_\_ SAT \_\_\_\_\_\_\_\_ Number of absences this year \_\_\_\_\_\_\_\_ Rank in class \_\_\_\_\_\_\_\_\_\_\_ What major course of study do you plan to pursue in college. Explain why.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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## E. School Activities

|  |  |  |
| --- | --- | --- |
| Activity  | Grade  | Accomplishments  |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |

**Work Experience** (List most recent job first)

|  |  |  |
| --- | --- | --- |
| Employer  | Date Employed  | Position  |
|   |   |   |
|   |   |   |
|   |   |   |

## Community Involvement

|  |  |  |
| --- | --- | --- |
| Activity  | Grade  | Organization  |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |

**Additional information may be included on a plain sheet of paper attached to this application.**

Please explain why you need this scholarship. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How many hours of community service do you have? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you applied for Florida Bright Futures? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you receive Bright Futures? If yes, what level? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ List additional financial aid and/or scholarships for which you are applying or have already received and the amount of each:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**As a component of this scholarship, you must serve ten hours of community service with the J.P. Hall Charities. Are you willing to make this commitment?**

## Yes\_\_\_\_\_ No \_\_\_\_\_

**I authorize the J.P. Hall Children’s Charities to request information from my high school guidance counselor and the college I choose to attend regarding my academic record and conduct.**

**I certify that the information contained in this application true and correct.**

**Applicant’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## Parent/ Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_