The Joseph A. and Rhea M. Jeffries Memorial Scholarship

Application Form for 2024-25 School Year

 The Joseph A. & Rhea M. Jeffries Memorial Scholarship is a $750 scholarship that is granted to a Stark County student who has demonstrated academic achievement, character, leadership, and service to school and community. Two scholarships will be awarded for the 2024-25 academic year.

Applicants must meet the following **requirements**:

1. Be a resident of Stark County and a senior in or a graduate of a Stark County high school
2. Be accepted or have an application in process by an accredited college or university
3. Have a cumulative GPA of at least 2.6 on a 4.0 scale

Please include in your **application**:

1. A completed ***typed*** application form

Forms in Microsoft Word and PDF can be downloaded from [www.josephajeffries.com/scholarship.html](http://www.josephajeffries.com/scholarship.html)

1. Two Essays each between 250-500 words for the prompts below. Please double space and use Calibri size 12 font or equivalent.
	1. Explain your career goals and objectives.
	2. Write an *autobiographical* essay about your need for this scholarship.
2. A List of extracurricular activities, community activities, and work experience. Include years of active participation, offices held and honors received. A table may also be utilized.

Example: High school club 2022-2025 treasurer 2024

1. Transcript
	1. High school students should submit an **official** transcript with in-progress grades and courses and all ACT and/or SAT scores.
	2. Freshman status college students should submit an official high school and college transcript.
	3. Upper-class status college students need only submit an official college transcript.
2. Two (2) letters of recommendation with at least one recommendation from school personnel.

**Applications must be post marked by March 22, 2024.**

Please mail your application, transcript, and letters of recommendation to:

 Scholarship Committee

 9415 Reeder Avenue NE

 Louisville, OH 44641

Note: An incomplete or non-typed application will not be considered.

For additional information, email the committee at scholarship@josephajeffries.com

**Applicant Information**:

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

Parents’ Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year of Graduation: \_\_\_\_\_\_\_\_\_

High School GPA: (unweighted) \_\_\_\_\_\_\_\_\_\_\_\_\_ (weighted) \_\_\_\_\_\_\_\_\_\_\_

College GPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ after \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credit Hours

College(s) Applied to/or Attending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you planning to be a full time student? \_\_\_\_\_ Yes \_\_\_\_\_ No

Proposed College Major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Recommendations**: Please provide the following information for the writers of your recommendations. At least one must be from school personnel.

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Attestment**:

 I hereby apply for the Joseph A. & Rhea M. Jeffries Memorial Scholarship. The information contained in this application is true to the best of my knowledge. This information and that contained in my high school and college transcripts are hereby released to The Joseph A. & Rhea M. Jeffries Memorial Scholarship Committee.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_