

Johnson City Community Education Foundation (JCCEF)

Guidelines & Application for Student Scholarships

Purpose

To provide support funding for deserving students who wish to continue their post-secondary education.

General Information

Applications may be submitted by senior students who have expressed interest in enrolling in a technical school, college, or university.

Student Criteria and Information

1. The student must be enrolled in LBJ High School in Johnson City, Texas.
2. The student must be post-secondary school bound.
3. The student must provide a current certified transcript of high school credits including test scores.
4. The student must give Teacher Reference forms and envelopes to three teachers.
5. The student must complete the JCCEF application form and submit it to the LBJ High School Counselor on or before the fourth Monday in April.

Application and Award Procedures:

1. The counselor will forward the application to the Chair of the JCCEF Selection Committee. (Student should retain a copy of the application for his record. Applications will not be returned.)
2. The JCCEF Selection Committee will evaluate and rank each application.
3. Finalists will then be notified of the date for an interview with the JCCEF Board of Directors.
4. Each finalist will appear before the Board, give a re-cap of his achievements and answer questions from members.
5. Winners will be announced at the graduation ceremony.
6. Scholarship funds will be paid directly to the designated school after verification of enrollment is provided to the Board Treasurer.

Johnson City Community Education Foundation Student Scholarship Application Form

SECTION 1: PERSONAL INFORMATION

Name: Last _____ First _____ Middle _____

Address: Street/PO Box _____ City _____ State _____ ZIP _____

Home Phone: _____ Other Phone: _____

Parents' or Guardians' Name(s): _____

SECTION 2: HIGH SCHOOL ACADEMIC RECORD

GPA _____ Class Rank _____ College hours already acquired _____

SAT Scores: Verbal _____ Math _____ Written _____ Total _____

ACT Scores: _____

TAKS: Commended (Y/N)

English _____ Social Studies _____ Math _____ Science _____ Writing _____

SECTION 3: POST-SECONDARY PLANS List 2 schools are you interested in attending:

Technical School/College/University	Field of Study	Applied/Accepted
_____	_____	_____
_____	_____	_____

SECTION 4: ACTIVITIES

Sports /Band	Hours per week	Year/Years	Community	Hours per week	Year/Years
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Clubs/Other	Hours per week	Year/Years	Employment	Hours per week	Year/Years
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

SECTION 5: AWARDS AND HONORS

Academic

Sports/Band/Other

SECTION 6: LEADERSHIP POSITIONS

School Organization Office or Position Year(s)

Community Organization Office or Position Year(s)

SECTION 7: ESSAY

On a separate sheet submit an essay about yourself. Please include any other information that might be important for the Scholarship Committee to know. Sell yourself—what is important to you, your plans, your goals, your history, your family, your best qualities, etc.

SECTION 8: TEACHER REFERENCES (Form is on next page.)

Teacher

Subject Taught

Year

1) _____

2) _____

3) _____

SECTION 9: SIGNATURES

All information contained within this application is, to the best of my knowledge, true and accurate.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Counselor Signature _____ Date _____

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Student Scholarship Application**

Teacher Reference

Applicant's Name (Please print) _____

A copy of this form should be given to three of your teachers along with an envelope addressed to the chair of the JCCEF Selection Committee in care of the school counselor. Also print your name on the outside of the envelope.

I hereby waive my right of access to this reference report.

Applicant's Signature _____ Date _____

To the teacher: Please evaluate the applicant on each characteristic by placing a check in the column that most nearly represents your opinion.

	Outstanding	Above Average	Average	Below Average	Inadequate Knowledge
Dependable					
Prompt					
Courteous					
Respectful					
Honest					
Team Player					
Attendance					
Emotional Stability					
Enthusiasm					
Relationship to Peers					
Disciplined					
Communication Skills					
Leadership Ability					
Takes Initiative					
Overall Rating					

How long have you known the applicant? _____

Additional comments: _____

Teacher's Signature: _____ Date _____

Please place in envelope and return to the school counselor. Be sure that the student's name is on the outside of the envelope.