

SIDNEY JAYCEES SCHOLARSHIP APPLICATION

APPLICANTS FULL NAME AND DATE OF BIRTH _____

APPLICANTS CURRENT ADDRESS _____

CURRENT PHONE NUMBER _____

INTENDED MAJOR FIELD OF STUDY _____

UNIVERSITY OR COLLEGE ATTENDING _____

ESTIMATED TOTAL SCHOOL COST: TUITION _____ BOOKS _____

OTHER SCHOLARSHIPS AND FINANCIAL AID RECEIVED (INCLUDE AMOUNT):

HIGH SCHOOL EXTRA CURRICULAR ACTIVITIES:

OUT OF SCHOOL ACTIVITIES (WORK, NON SCHOOL SPONSORED ACTIVITIES):

ESSAY: ON A SEPERATE PIECE OF PAPER, PLEASE DESCRIBE IN 75 WORDS OR LESS

1. WHY YOU WANT TO BE THE RECIPIENT OF THE JAYCEES SCHOLARSHIP
2. ANY OTHER ABILITIES THAT HAVE NOT BEEN PREVIOUSLY ADDRESSED

THIS APPLICATION MUST BE ACCOMPANIED BY:

1. HIGH SCHOOL TRANSCRIPT
2. TWO LETTERS OF RECOMMENDATION FROM AN EMPLOYER, CLERGY, COACH OR TEACHER.

PLEASE SEND THE APPLICATION TO:

SIDNEY JAYCEES
P.O. BOX 455
SIDNEY, MT 59270

DEADLINE IS APRIL 26TH