

Deadline to file: April 1, 2024 **Incomplete Applications WILL NOT be considered**

Applicants will be selected based on the following criteria: 1. Academic performance 2. Community participation and/or volunteer work 3. Extracurricular activities 4. Financial need (Note: no applicant shall be selected OR excluded based on race, ethnicity, gender, or religious preference.)

Name	e Birth Date			
Address				
Father's Name				
Father's Employment/Place of Work	Type Mother's Employment/Place of Work/Type			
Number and Ages of Other Children	at Home:			
School Activities and Organizations church, City, and other philanthropic	feel free to supplement and include letters of recommendation)- include organizations:			
What do you know about the Jake W Foundation?	lson Memorial			
Would you be willing to volunteer w	th Jake Wilson Memorial foundation and what impact would you hope to organization?			
	community:			
What high school do you currently at	tend?			
Employment: List employers and typ	e of employment during high school			
	n to attend?			
What have you chosen for your degree	e/career?			

For which schools have you applied for admission?

Test scores if applicable: SAT _____ ACT ____ THEA _____

Note: if you are THEA exempt, please indicate Y/N and how:

*This part to be filled out by Counselors *Applicants must submit a current copy of high school transcript with this application				
High School Graduation Plan	: Minimum	Recommended	Distinguished	
G.P.A.	Class Rank			

Attach an essay with a minimum of 500 words (no more than 1500) telling us why you are the best choice to receive this scholarship **excluding** race, ethnicity, gender, and/ or religious reasons.

The above information is true. I shall accept the decision of the Scholarship Selection Committee as final.

Signature of Applicant _____

For additional information please contact 940-208-JAKE (5253), or info@jakecwilson.com

<u>Send completed applications to info@jakecwilson.com</u> or <u>scholarship@jakecwilson.com</u>