



Juneteenth – Jefferson City Scholarship Application

College or Post Secondary Student

DEADLINE DATE FOR SUBMISSION OF APPLICATION: JULY 22, 2023

Name: (Last, First, Middle) _____

Gender: (Male or Female) _____

Date of birth: _____

Name of Parent or Guardian: _____

Phone: _____

Address (Street or PO Box): _____

City, State, Zip Code: _____

Cumulative GPA: _____

ATTACH A COPY OF ACADEMIC TRANSCRIPT(S).

Please use the space provided below for any additional information that may be pertinent to the committee's evaluating your application:

(If more space is needed, attach a separate sheet)

I have carefully read and fully understand the criteria information supplied by the Juneteenth-Jefferson City Scholarship Committee. To the best of my knowledge, I attest that all the above information is true. I am aware that any false information will automatically forfeit this application.

Signature: _____ Date: _____

Please print and submit this completed form and requested transcript to:

**Juneteenth -Jefferson City Scholarship Committee
PO Box 1241
Jefferson City, MO 65102**