



AGATHA JACKSON LIFE ENRICHMENT NETWORK

2025 Scholarship Fund Application Form

Demographic Information

Applicant's First Name: _____

Applicant's Middle Name: _____

Applicant's Last Name: _____

Applicant's Date of Birth: _____

Applicant's Gender: _____

Applicant's Address: _____

Applicant's s Email Address: _____

Applicant's Phone Number: _____

Name of Your Current School: _____

Address of Your Current School: _____

Phone Number of Your Current School: _____

Start Date at Primary School: _____

Did You Complete Grades 1, 2, 3, 4, 5, and 6 at Your Current School? Yes _____ No _____

What is the name of the high school you wish/plan to attend in September 2025?

Where (city and parish) is the high school you wish/plan to attend in September 2025 located?

Mother's Full Name: _____

Mother's Occupation: _____

Mother's Place of Employment: _____

Mother's Email Address: _____

Mother's Phone Number(s): _____

Father's Full Name: _____

Father's Occupation: _____

Father's Place of Employment: _____

Father's Email Address: _____

Father's Phone Number(s): _____

Name of Guardian (*if applicable*): _____

Guardian's Occupation: _____

Guardian's Place of Employment: _____

Guardian's Email Address: _____

Guardian's Phone Number(s): _____

What is the name of the church you attend?

What is the address of your church:

How do you get to and from school each day?

Applicant's Name: _____

Today's Date: _____

Applicant's Statement of Financial Need

In your own words, please explain why you need the scholarship AND how you will use it

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

Applicant's Name: _____

Today's Date: _____

Applicant's Educational Goals and Plans

In your own words, please complete the sections below about your educational goals, steps you will take to achieve the stated goals, people who will support you along the way, and where you see yourself in the next 10 years.

My Educational Goals: _____

My Plan to Achieve My Goals: _____

People Who Will Support Me: _____

Where I Envision Myself in the Next 10 Years: _____

Applicant's Name: _____

Today's Date: _____