



The Idaho Jazz
Education Endowment

College Scholarship Application Form

STUDENT NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

DATE OF BIRTH: _____

PARENTS NAME: _____

PHONE: _____ EMAIL: _____

GRADUATING HIGH SCHOOL: _____

CHOSEN COLLEGE / LOCATION: _____

PROPOSED COURSE OF STUDY _____

STUDENT ID NUMBER: _____

**Attach a letter describing, in your own words, why you feel you should be granted a scholarship cite musical experience, hobbies, aspirations or anything else that is applicable. Also, you may attach extra information such as letters(s) of recommendation to this document or in your website.

MAIL COMPLETED FORM TO: IDAHO JAZZ EDUCATION ENDOWMENT
P.O. Box 140655
Garden City, ID 83714

OR EMAIL: ijsccommunications@gmail.com

STUDENT SIGNATURE: _____