

**Janice M. Scott Memorial Scholarship Fund (JMSMSF)
Criteria Sheet**

I. Qualification/Eligibility

- a. US Citizen or permanent resident of US
- b. GPA of 3.0/equivalent or higher (out of a 4.0 scale)
- c. High School Senior who will matriculate full-time at a US accredited four-year college or university within the fifty states or District of Columbia.
- d. Have demonstrated leadership abilities through participating in community services or other extra curricular activities.
- e. Combined adjusted income of the parents cannot exceed \$60,000.

II. Required Documentation

- a. **Application**- Each candidate must submit a complete and timely application. An application will be considered incomplete and not processed if all instructions have not been followed or the material presented is insufficient to permit an adequate review. Do not send supplemental or corrected material after the deadline date. Applications must be typed or completed with the use of a black/blue writing ink pen. The staff of the JMSMSF will not accept any application packet or portion thereof that is filled out with a pencil. Application and required documents should be neat and easy to read. Materials should be impeccable in terms of appearance and legibility. **Mail the complete application packet so that it is received or postmarked on or before the deadline date of March 31st.** Application packet should be mailed to:

Janice M. Scott Memorial Scholarship Fund
ATTN: Abraham Scott
Post Office Box 1023
Springfield, Virginia 22151

- b. **Official Transcript**- An official copy of the applicant's high school transcript provided by the high school staff in a sealed envelope must be included in the application packet. Submission of an application along with the required documents for this scholarship constitutes your authorization for the JMSMSF Scholarship Selection Committee to review your academic record.
- c. **Letters of Recommendation** – Each packet must include two letters of recommendation (LOR). One of the letters must be from a faculty member who has taught the applicant in the classroom. Each LOR must include the reference's name, address, telephone number, and information regarding how long and in what capacity he or she has known the applicant.
- d. **Financial Document** – The submission packet must include a copy of the applicant's Student Aid Report from the Department of Education or FAFSA. If none of these reports are not available, the applicant can submit a copy of the parent's income tax return (Submit only the front and back of the IRS Form 1040 or IRS Form 1040 EZ) for the year prior to the year in which the application packets are due. **(WILL NOT ACCEPT INCOME TAX RETURNS OF ANY OTHER YEARS).**
- e. **High School Senior Picture** - A high school senior picture or a picture taken above the waistline and in color. The picture must be an original or printed on official photo paper. Do not submit any picture taken at an angle. Applicant is required to print his/her full name on the reverse-side of the picture.

- f. **Essay** – Each candidate must provide a 500-1000 word essay focusing on “Describing his or her planned undergraduate study and how he or she plans to apply it upon graduation” or “Who is your role-model and how he or she has influenced/impacted your life”. The individual cannot be a relative. Essay technical requirements: double space, 11 point font size, one inch margin on all sides, submit original only, submit in English, and certify authorship/originality at the end of the essay. The essay will be evaluated on originality, content, thought provoking ideas, innovation, and concepts previously unpublished. Applicant must certify the authenticity of the writing at the end of the essay by affixing the below statement and then signing beneath it.

“I certify that I personally wrote this essay”

Signature

- g. **Application Submission Instructions:** Do not staple or place paper-clips on any documents in the submission packet. White-out or line-through with an ink-pen any sensitive information such as social security numbers on any documents in the application submission packet.

Scholarship Application

Deadline: March 31st

Janice M. Scott Memorial Scholarship Fund

You are to submit all documentation to The Janice M. Scott Memorial Scholarship Fund, ATTN: Mr. Abraham Scott, Post Office Box 1023, Springfield, Virginia 22151

I, _____ have read and understand the requirements of the Janice M. Scott Scholarship Fund application submission process. I authorize school personnel of my high school to release transcripts of my academic record and other information requested for consideration by the Janice M. Scott Memorial Scholarship Fund Scholarship Selection Committee. I understand that this application will be made available only to qualified individuals who need to see it in the course of their duties. I waive the right to access any sealed prepared and/or written documents in support of my application submission process. If selected for a scholarship, I agree to allow my photo and mini-BIO be posted on the Janice M. Scott Memorial Scholarship Fund's website. I also affirm the information contained herein is true and accurate to the best of my knowledge and belief.

Date _____ Signature _____ *

Legal name in full (Print/Type)			
	Last Name	First Name	M.I.
Address of Permanent residence	Number, Street, and Apartment Number		
	City	State	ZIP
Name of your High School			
	School Name		
Address of High School			
	Address	State	ZIP
<input type="checkbox"/> African American <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Other		Home telephone: ()	
		School telephone: ()	
		E-mail address:	
Class Rank: Number _____ out of a total of _____ Seniors		Date of birth	Age
		Month/Day/Year	
(Check one) I am a <input type="checkbox"/> US citizen <input type="checkbox"/> Permanent resident <input type="checkbox"/> Resident alien expecting citizenship by the date of award			
Current cumulative GPA		On a scale of	

Number of member(s) in household _____. Number of member(s) in household who will be attending college during the fall semester _____.

***Parent or Legal guardian's signature is required if applicant is under 18 years of age.**

Name:

1. List high school activities (student government, sports, publications, school sponsored community service programs, student-faculty committees, arts, music, etc.) List in descending order of significance.

High School Activities

Dates

Offices

2. List public service and community or civic activities (homeless services, environmental protection/conservation, advocacy activities, work with religious organizations, etc). Do not repeat items listed previously. List in descending order of significance.

Activities/type
Of work

Role/employer

Dates

of Weeks Active/Average
number of hours or weeks

3. List part-time/full-time jobs, non-government interns, and government activities (internships with government agencies, partisan political activities, ROTC, municipal boards, and commissions). List student government under item 1.

4. List awards, scholarships, publications or special recognitions that you have received. List in descending order of significance.