



Jackson Companies Scholarship Fund

Deadline: April 1st

<u>Who Can Apply?</u>	<u>Required Application Materials</u>
<ul style="list-style-type: none"> • Applicants must be the child or dependent of an active, full-time Jackson Companies employee at the time of application. Child or dependent is defined as a son, daughter, step-son, step-daughter, or child of whom the Jackson Companies employee has custody. • Must have a cumulative GPA of at least 3.0 or higher from high school or an accredited post-secondary institution using an unweighted standard 4.0 scale. • Must be a United States citizen or legal resident. • Applicants may reapply on an annual basis, as long as their parent is still an active, full-time employee of Jackson Companies. • Nontraditional students are encouraged to apply. • Preference may be given to students who demonstrate a greater financial need. 	<ul style="list-style-type: none"> • Copy of your most recent unofficial high school or college transcript; • A written statement (1-3 pages in length) describing the following: <ul style="list-style-type: none"> ○ Educational, career goals and objectives; ○ Extra-curricular activities, volunteerism, awards, honors, and/or offices held; ○ Work experience and if plan to work while attending college; ○ Why you should be selected for this scholarship; • Please attach a brief paragraph explaining your family’s current socioeconomic and financial situation including number of siblings, number of siblings currently in college, and any extenuating financial circumstances that you believe qualify you to receive this scholarship.

Application Instructions:

- Complete pages 1 & 2 of this application and attach the *Required Application Materials* listed above.
- **Combine ALL materials into a single PDF attachment.** Google docs will not be accepted.
- Email completed PDF applications to scholarships@idahocf.org *no later than 11:59pm MST on April 1st.* Late/Incomplete applications will not be considered.

APPLICANT INFORMATION

Your Name: _____

Name of your parent/guardian who is a Jackson Companies employee: _____

Mailing Address: _____

City/State/ZIP: _____

Personal Email: _____

Cell Phone: _____

Date of Birth: _____

Have you received a Jackson Companies scholarship before? If yes, in what year(s)? _____

SCHOOL INFORMATION

HIGH SCHOOL STUDENTS:

Name of Current High School: _____

City/State: _____

Current High School Unweighted GPA: _____

Anticipated Date of Graduation: _____

Which post-secondary institution do you plan to attend? _____

Have you been accepted? _____ Anticipated annual cost of attendance: _____

What field do you plan to study? _____

COLLEGE STUDENTS:

Name of College: _____ City/State: _____

Current College Unweighted GPA: _____ Anticipated Date of Graduation: _____

Number of credits completed towards degree: _____

CERTIFICATION

By submitting this application (written or electronically) I consent to the gathering, use and releasing of my information by the Idaho Community Foundation as it relates to the funding of the scholarships. I understand the information is needed for the purpose of the scholarship payments and for normal business operations of the agency. This consent is valid for three years from the date signed, unless I revoke this consent, in writing, to the extent of the information already shared. I certify that the information provided is complete and accurate to the best of my knowledge. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature (Typed or Written) _____

Date _____

If selected for a scholarship, you will be notified by email.

Questions?

Email scholarships@idahocf.org or call (208)342-3535.