

***Jackson Community Association  
Scholarship Application***

Name: \_\_\_\_\_ Date \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_  
Occupation: \_\_\_\_\_

Mother's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_ Phone: \_\_\_\_\_  
Occupation: \_\_\_\_\_

Applicant lives with: \_\_\_\_\_ Number of brothers and sisters living at home: \_\_\_\_\_

How many of your siblings are currently attending a post-secondary institution? \_\_\_\_\_

Is either parent a KHS graduate? \_\_\_\_\_ If so, which parent (please provide maiden name if necessary) and what year did they graduate? \_\_\_\_\_

Class Rank: \_\_\_\_\_ SAT Section Scores: Math \_\_\_\_\_ Writing & Reading \_\_\_\_\_

Academic honors you have received (please use additional sheet if necessary): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Extracurricular/Volunteer Activities (*please use additional sheet if necessary*): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Activities specific to the Town of Jackson (please use additional sheet if necessary):* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Work Experience:*** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Post-Secondary School you plan to attend:*\_\_\_\_\_

*Program you plan to study:*\_\_\_\_\_

*Cost per year:*\_\_\_\_\_ *Student Savings:*\_\_\_\_\_

*Are there any special circumstances that need to be considered?*\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please include a copy of your transcript and a personal essay you have submitted for other scholarship applications.

Deadline for application is May 1st.

Please return application to  
Kennett High School  
Guidance Office or mail to:

*Jackson Community Association  
c/o Anne McBride Kantack  
P.O. Box 29  
Jackson, NH 03846*