## Jackson Community Association Scholarship Application

Name:	Date
Address:	
	Phone:
Father's Name:	
	Phone:
Occupation:	
Mother's Name:	
Address:	
	Phone:
Occupation:	
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Applicant lives with:	Number of brothers and sisters living at home:
How many of your siblings are cu	rrently attending a post-secondary institution?
now many of your storings are ea	frently attending a post secondary institution.
Is either parent a KHS graduate?	If so, which parent (please provide maiden name if
1	graduate?
necessary) and what year are they	5.uddute1
Class Rank: SAT S	ection Scores: Math Writing & Reading
<del></del>	& & & & & & & & & & & & & & & & &
Academic honors you have receiv	ved (please use additional sheet if necessary):
	<u>,</u>
Extracurricular/Volunteer Activiti	ies (please use additional sheet if necessary):
Activities specific to the Town of	Jackson (please use additional sheet if necessary):
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Work Experience:	

Post-Secondary School you plan to attend:		
Program you plan to stud	ly:	
Cost per year:	Student Savings:	
Are there any special circ	cumstances that need to be considered?	

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

Your transcript, personal essay and completed application can be e-mailed to

Emily Benson, JCA Secretary at <a href="mailto:missembenson@gmail.com">missembenson@gmail.com</a>
or mailed to

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

Deadline is May 15th.