



www.jeffersonstate.edu
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College Opportunity
Scholarship
Application

FOR OFFICE USE ONLY
RECOMMENDATION:
ESSAY:
HOURS at JSCC:
TRANSFER HOURS:
TOTAL HOURS:
GPA:

Number of Semesters for Scholarship: ( )
Initials

Please submit this application, a two-page essay on the topic "How Jefferson State Community College is helping you obtain your future educational plans and your plans following graduation from Jefferson State?" and one recommendation letter from an instructor, teacher or community leader.

Students receiving this scholarship must have and maintain a cumulative 2.0 GPA.

Academic Year

1. Personal Information

Name Last First Middle Social Security No.

Address Street No. City State Zip County

Home Phone Cell Phone Birthdate Mo./Day/Yr.

Marital Status Email

Citizenship (Must be U.S. Citizen or provide proper documents) Sex

Employer Work Phone

Members of your immediate family with whom you live

2. Academic Information

Major Beginning enrollment at JSCC: Term Year

Last term attended: Anticipated graduation/transfer: Term Year

Hours enrolled this term Hours attempted at JSCC Hours passed

Other colleges attended \_\_\_\_\_

High school attended \_\_\_\_\_ Year graduated \_\_\_\_\_ ACT Score \_\_\_\_\_

**3. Scholarship Information**

Are you currently receiving a scholarship? \_\_\_\_\_ If yes, which one(s) \_\_\_\_\_

Indicate scholarship(s) for which you are applying:

Academic \_\_\_\_\_ Organization \_\_\_\_\_ College Opportunity \_\_\_\_\_

If other, indicate which type \_\_\_\_\_

\_\_\_\_\_

**4. Activities**

List school or community service activities (i.e., clubs, offices held, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**5. Financial Resources**

Will Vocational Rehabilitation or another agency pay your tuition and fees? \_\_\_\_\_

\_\_\_\_\_

Has either of your parents or legal guardians graduated from a four-year college? \_\_\_\_\_

I grant permission to release information from my educational and financial records to scholarship donors. If I am awarded a scholarship, I grant permission to Jefferson State Community College to issue press releases.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date