



JAMAICA FOUNDATION OF HOUSTON

P.O. Box 710824, Houston TX 77271-0824

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www.JamaicaFoundationOfHouston.org

Scholarship Application

IMPORTANT INFORMATION

1. Applicant must be enrolled full-time in or accepted by an accredited post-secondary institution.
2. Applicant must submit a current original Transcript, 2 letters of recommendation, and a wallet/passport- sized photograph.
3. Applicant must also submit a typed essay of 500 words or less with this application of career goals, academic achievements, organizations, employment, and any other extracurricular activities that may enhance the chance of receiving this scholarship.
4. APPLICATION MUST BE POSTMARKED NO LATER THAN MARCH 31ST.
5. THERE IS A PENALTY FOR INCOMPLETE APPLICATIONS.

Please Note: All checks will be made payable to the school-- without exceptions.

PERSONAL INFORMATION (Please Print)

Name: _____
Last First M. I. Student ID or SS No.

Address: _____
Street Telephone Email address

_____ City State Zip Date of Birth

With whom do you live? Mother _____ Father _____ Self _____ Other _____

Which status applies to you? () US Citizen () Permanent Resident () Student Visa () Other

Do you plan to attend the Scholarship Awards Luncheon in early May? _____

FAMILY INFORMATION:

Mother: _____
Last Name First M.I. Occupation Telephone

Address: _____
Street City State Zip

Father: _____
Last Name First M.I. Occupation Telephone

Address: _____
Street City State Zip

Number of brothers and sisters living at home: _____ Ages: _____

Number of brothers and sisters enrolled in college: _____ Other brothers/sisters: _____

EDUCATION

College/High School Name: _____ (Attach an original transcript)

GPA Score: _____ SAT/ACT Score: _____ Honors and Awards Received _____

Which college do you expect to or currently attend? _____

What is your intended major? _____ What is your intended minor? _____

FINANCES (Please list all source of finances)

1. Have you applied for or received any other scholarships? Yes _____ No _____

2. If yes, please list: Donor: _____ Total Amount per Year: _____

3. List any additional type and amount of contributions you expect to receive from parents/guardians/other source:

EXTRA-CURRICULAR INVOLVEMENT

1. List your interests, organizations, offices held, etc. which have contributed to your growth and development:

2. Outline your employment history here:

3. Briefly describe your long and short-range goals: _____

PLEASE PROVIDE THE COMPLETE INFORMATION REQUIRED FOR THREE (3) REFERENCES BELOW:

Name	Address or Email	Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant's signature (If 18 or older) OR Parent/Guardian's signature: _____ Date: _____