

# Craig Doubledee Memorial Scholarship 2021

**Eligibility:** To be eligible for the Craig Doubledee Memorial Scholarship a student must have:

- 1.) Attended Carl Junction High School for four years **AND**
- 2.) Been a member of the C.J. FFA **OR** participated in the varsity basketball program at C.J.H.S.

**Awarding of the scholarship will be based on:**

- 1.) The student's grades, attendance & cumulative GPA (please attach an unofficial transcript)
- 2.) Letter of recommendation by an FFA Advisor or basketball coach
- 3.) Letter from the applicant explaining their activities in school, post-graduation plans, as well as why they believe they should receive the scholarship.

**PLEASE TYPE OR COMPLETE IN BLUE OR BLACK INK**

Name \_\_\_\_\_

Phone # \_\_\_\_\_

Address \_\_\_\_\_

DOB (\_\_\_/\_\_\_/\_\_\_) Age \_\_\_\_\_

Parent's Name \_\_\_\_\_ If you do not live with your parents, whom do you live with?

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Father/step's Occupation \_\_\_\_\_

Mother/step's Occupation \_\_\_\_\_

Ages of all family members:

Number of family members living at home \_\_\_\_\_

\_\_\_ / \_\_\_ / \_\_\_ / \_\_\_

Have you filed the FAFSA application? **Yes/No**

Do you qualify for the A+ program or have you qualified for another scholarship? **Yes/No**

The information on this application is true to the best of my knowledge. Any misrepresentation of information on this application will result in the dismissal of this application for consideration for the scholarship as well as reimbursement of any money that had been awarded prior to the discovery of misrepresentation.

(parent must sign if under 18 years of age) **Signature** \_\_\_\_\_ (\_\_\_/\_\_\_/\_\_\_)

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**THE COUNSELOR WILL COMPLETE THE BOTTOM PORTION OF THIS APPLICATION**

Attendance % for all four years (\_\_\_\_\_%)

Cumulative GPA on 4.0 scale (\_\_\_\_\_)

Counselor's Signature \_\_\_\_\_

Check list: \_\_\_unofficial transcript \_\_\_ advisor/coach's letter \_\_\_applicant's letter \*\*\*\*\* application is due April 15, 2020 \*\*\*\*\*

RETURN FORM TO THE CJHS COUNSELING OFFICE