



SCHOLARSHIP APPLICATION

(Please Type or Print Legibly)

Applicant Personal Information

Date: _____

Name: _____

Address: _____

Telephone No: _____

Email Address: _____

Parent/Guardian Info: _____ Age: _____

Applicant Current and Post Education Information: _____

High School Currently Attending: _____ Are You Dual Enrolled? Yes__ NO__ Exp Grad. Date ____

SAT Verbal: _____ Math: _____ ACT: _____ Have You Been Accepted: _____

Prospective Major: _____ College of Choice: _____

Family Information: _____

Parent(s) or Guardian Name: _____

Parent(s) or Guardian Address: _____

Number of Family Members: _____ Number Currently Attending College: _____

Family Income: Below \$20,000 _____ \$20,000 to \$35,000 _____ \$35,000 to \$50,000 _____

\$50,000 to \$65,000 _____ \$65,000 to \$80,000 _____ \$80,000 to \$95,000 _____ Above \$95,000 ____

**COMPLETE AND ATTACH ALL PAGES, PHOTOS, AND REQUIRED RECOMMENDATIONS
 MAIL COMPLETED APPLICATION TO THE ADDRESS LISTED ON THE TOP OF THIS APPLICATION**

I have read and hereby accept the conditions, rules, and regulations outlined under "Requirements for Applicants", "Terms and Conditions" of this application, and agree to accept the decision of the Foundation as final. I consent for the high school to release the transcript or other records of (myself/my child) to the REJ MSF, Inc.

I FURTHER UNDERSTAND, THAT IF I HAVE NOT ENROLLED IN A COLLEGE/TRADE/TECHNICAL SCHOOL AND HAVE NOT SUBMITTED A COLLEGE CLASS SCHEDULE WITHIN ONE (1) YEAR OF RECEIVING THIS SCHOLARSHIP, I WILL HAVE FORFEITED ALL CLAIMS TO SAID SCHOLARSHIP.

Student's Signature: _____

Parent's Signature: _____

