
Minnesota JCI Senate & United States JCI Senate Foundation College/University Scholarship Application

Eligibility: Graduating high school seniors in the United States, where that state has an active JCI Senate program (see www.usjcisenate.org [under scholarship tab] for a listing of eligible states). **You must be a U.S. citizen to apply for this scholarship.**

This package contains information and directions for applying to the United States JCI Senate Foundation Scholarship Program. Each year (April) \$1,500 grants will be awarded to graduating high school seniors in the United States, who plan to continue their education at accredited post-secondary colleges, or universities within the United States. The number of grants awarded annually will be at the discretion of the United States JCI Senate Foundation. The monies must be used for educational expenses in the first year of full-time study. Checks awarded will be made out in the name of the recipient and the educational institution of their choice.

Instructions for applying for the US JCI Senate Foundation Scholarship

Please read the following points carefully. **Failure to comply will be cause for disqualification.**

1. Submission preference will be in a Microsoft Word compatible format. Typed or neatly hand printed (blue or black ink only) submission will also be accepted. DO NOT DUPLEX YOUR APPLICATION. USE ONLY SINGLE SHEETS.

2. Included in this application package are all the necessary forms. Your application packet pages must be submitted in order as listed below. **Failure to comply will be cause for disqualification.**

- Student Check List
- Wallet size photo taped to a sheet of blank paper – *see #14*
- Applicant Information
- High School Contacts
- College Information
- Parent or Guardian Information
- Financial Statement
- School & Community Involvement
- Personal Statement (300 to 500 words) – *see #3*
- College or University Acceptance Letter (if applicable)
- Supporting documentation of your choice (awards, certificates, articles, pictures, etc).
 - Limit three (3) sheets
- Reference Letters – 3 – *see #4*
- Signature – *see #6*
- Transcripts (grades and state / national test scores) – *see #5*

3. Your personal statement is limited to 500 words. Any more than 500 words will not be judged.

4. Reference letters are limited to three (3) letters with a maximum length of one (1) page (one side only) each.

5. Your school transcript should be the very last attachment to your application package. **Any student with a GPA of 3.75 and above will be considered for this scholarship grant.**

YOUR ACT / SAT NATIONAL TEST SCORES SHOULD BE INCLUDED IF YOU HAVE THEM. **Note:** While the ACT / SAT scores are not mandatory – Extra judging points will be awarded for the test scores, if included.

6. Sign the bottom of the Personal Statement section.

7. Your name must be on the top right corner of each sheet in the package, along with a page number.

When using a MS-Word compatible editor, enter you name in the 'Header' section.

8. Each student must have an active, working email address listed.

9. All materials **MUST** be submitted under one cover. Materials sent in multiple mailings will **NOT** be accepted.

10. Your application must be postmarked no later than **January 17, 2025** and sent to the MN State Scholarship chairman Amie Klouse.

11. NO electronic submissions will be accepted.

12. Do not include these first two pages of instructions in your reply.

13. Your application will be evaluated by persons outside of your area so **do not** use acronyms for items such as clubs, programs, events, or awards when they are not national programs. When the name of the item is not self explanatory, include a description. Example: REACH or J. Doe Memorial Award should include a description such as: St. Thomas Methodist REACH program to feed the homeless, J. Doe Memorial Award for Top Female Tennis player.

14. You must include a 2.0 X 3.0-inch head shot photograph for use in our National publications. This photo should be taped to a white sheet of paper with your name and state on the page under the photo. By signing the application, you agree that your name and photo may be used as part of the public relations of the US JCI Senate, the US JCI Senate Foundation and their affiliates such as the associated state programs.

15. To submit your application package:

Refer to the website www.usjciSenate.org under the scholarship section. Locate the state where you live and submit your application to the state chairman or contact or president listed for that state. **If your state is not listed, you are not eligible.** Do not submit the application to any address on the web page except to the person listed under your State Scholarship listing section (packages submitted to the wrong address will not be forwarded).

The due date is POSTMARKED BY JANUARY 17, 2025.

**Send them to
Amie Klouse
56633 150th ST
Austin, MN 55912**

United States JCI Senate Foundation College/University Scholarship Application

1. Applicant Information

Applicant Name			Date of Application
Applicant Home Address		Applicant e-mail address	
City	State	Zip Code	Phone Number
Are you a U.S. Citizen (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No			

2. High School Information

Name of applicants High School		Counselor Name	
Address & City	State	Zip Code	Phone Number
High School Staff E-mail contact (name and position)			

3. School Information

Name of College or University you plan to attend AND Major			
Address	City	State	Zip Code
Have you been accepted to this College or University <input type="checkbox"/> Yes (if yes, attach copy of acceptance letter) <input type="checkbox"/> No			

4. Parent or Guardian Information

Father's Name			Check here if father is deceased <input type="checkbox"/>
Father's Home Address			Occupation
City	State	Zip Code	Phone Number
Mother's Name			Check here if mother is deceased <input type="checkbox"/>
Mother's Home Address			Occupation
City	State	Zip Code	Phone Number

Do you have a Step-Parent or Guardian other than your Parents: Yes No

If YES, provide the following information

Step Parent or Guardian Name

Home Address		Occupation	
City	State	Zip Code	Phone Number

List in chronological order the names of your brothers, sisters or other persons dependent upon your parents for support

Name	Age	Relationship

5. Applicant's Financial Statement Information

The financial contribution of the applicant toward their own education is an important consideration in awarding this scholarship. The committee does not wish to penalize those students whose industry and careful planning have been a consideration in planning college attendance. This budget is to assist the committee in your understanding of the financial costs of your education. The **budget should be based on your first year of education**. Your budget does not have to balance income and expenses.

Income

1. Savings to date	1.	_____
2. Expected scholarship awards	2.	_____
3. Expected contribution from parents	3.	_____
4. Earnings from part-time work	4.	_____
5. Money from other sources: Include gifts from friends, relatives Education insurance, loans, etc.	5.	_____
Total Estimated Income		_____

Expenses

1. Tuition and Incidental Fees	1.	_____
2. Room and Board	2.	_____
3. Books and Supplies	3.	_____
4. Clothing	4.	_____
5. Incidental Expenses (Travel, Recreation)	5.	_____
Total Estimated Expenses		_____

Explain any special personal family or financial situation you believe merits consideration:
