

THE JOHN G. WILLIAMS SCHOLARSHIP FOUNDATION
STANDARD APPLICATION

P. O. Box 1229, Camp Hill, PA 17001-1229
717-795-9880, ext. 225
www.jgwfoundation.org

SUBMISSION DEADLINE – JUNE 15

APPLICANT

Legal Name (First Middle Last) _____ Female Male

Birth Date (mm/dd/yyyy) ____/____/____ SSN# ____-____-____ Email _____

Preferred Telephone Home Cell Home (____) _____ Cell (____) _____

Permanent Home Address _____

FUTURE PLANS

College Graduate school in which you are enrolled for the upcoming academic year _____

Incoming Freshman Sophomore Junior Senior Graduate Student year _____

Major/Intended Major _____ Anticipated Graduation Year _____

Academic Interests _____

What is the highest degree you intend to earn (i.e., long-term academic plans/goals)? _____

Career Interests _____

EDUCATION (CURRENT & PAST)

To be answered by all applicants:

High School _____ Graduation Year _____

To be answered by applicants who have completed at least one year of college –list all colleges attended (if more than two, please list on a separate page):

College/University _____ City/State _____
Dates attended (mm/yyyy – mm/yyyy) _____ Major _____
If applicable, Degree earned _____ and Graduation date _____

College/University _____ City/State _____
Dates attended (mm/yyyy – mm/yyyy) _____ Major _____
If applicable, Degree earned _____ and Graduation date _____

To be answered by applicants who have attained a college degree and now seek to attend or are attending graduate school (if more than one graduate school attended, please list on a separate page):

Graduate School _____ City/State _____
 Dates attended (mm/yyyy – mm/yyyy) _____ Course of study _____
 Degree anticipated earned: _____ Graduation date anticipated actual: _____

ACADEMIC HONORS/AWARDS

List your academic distinctions, honors, and awards received during the previous three (3) academic years (attach additional pages if necessary):

Honor	Year(s) Earned
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

WORK EXPERIENCE

List all jobs (including summer employment) for the past three (3) years (attach additional pages if necessary):

Employer	Position Held	Dates	Hrs/Wk	
_____	_____	_____	_____	<input type="radio"/> School Yr <input type="radio"/> Summer
_____	_____	_____	_____	<input type="radio"/> School Yr <input type="radio"/> Summer
_____	_____	_____	_____	<input type="radio"/> School Yr <input type="radio"/> Summer
_____	_____	_____	_____	<input type="radio"/> School Yr <input type="radio"/> Summer
_____	_____	_____	_____	<input type="radio"/> School Yr <input type="radio"/> Summer
_____	_____	_____	_____	<input type="radio"/> School Yr <input type="radio"/> Summer

EXTRACURRICULAR ACTIVITIES

List your principal extracurricular activities (sports, music, arts, theatre, clubs, organizations, community/volunteer, etc.), for the past three (3) years, *in order of importance to you*:

Activity	Leadership, if any	Dates/Grades/Years	Avg Hrs/Wk Spent
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

FAMILY

Household

Parents' Marital Status (relative to each other): Married Never Married Civil Union/Domestic Partners
 Widowed Separated Divorced

With whom do you make your permanent home? Parent 1 Parent 2 Both Legal Guardian
 Other (explain) _____

Please list both parents below, even if one or more is deceased or no longer has legal responsibilities toward you.

Parent 1: Father Mother Unknown
Is Parent 1 living? Yes No (Year Deceased _____)

Parent 2: Father Mother Unknown
Is Parent 2 living? Yes No (Year Deceased _____)

Name _____

Name _____

Home Address (if different from you):

Home Address (if different from you):

Preferred Telephone: Home Cell Work
(_____) _____

Preferred Telephone: Home Cell Work
(_____) _____

Email: _____

Email: _____

Occupation: _____

Occupation: _____

Employer: _____

Employer: _____

College (if any) _____
Degree _____ Year _____

College (if any) _____
Degree _____ Year _____

Graduate School (if any) _____
Degree _____ Year _____

Graduate School (if any) _____
Degree _____ Year _____

Siblings:

How many? _____ Age(s)? _____

If any siblings will be in high school for the upcoming academic year, what grade(s)? _____

If any siblings will be in college for the upcoming academic year, what year(s)? _____

REFERENCES

(2 LETTERS OF REFERENCE MUST BE ATTACHED TO APPLICATION)

Name	Address	Telephone
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Reference from School Work Other _____

Reference from School Work Other _____

This form is intended to collect information about your background, interests, and your plans. If appropriate, we encourage you to provide any other additional information and/or a resume that will help us know you better as a person and as a student.

The undersigned hereby makes application to The John G. Williams Scholarship Foundation. I understand the conditions and qualifications under which its scholarship loans are awarded, and authorize the Board of Trustees of The John G. Williams Scholarship Foundation to make any necessary inquiries as to any information I have included in this application.

Signed _____

Dated _____