



JERMON BUSHROD'S

Visualize & Rize Foundation Scholarship

Academic Year 2017/18 Scholarship Application

Jermon Bushrod's Visualize & Rize Foundation is offering a \$500.00 scholarship to two (2) Courtland High School senior athletes who are furthering their education after graduation. To qualify for these scholarships the applicants must:

- 1. Presently be a senior (in good standing) and participated in an athletic program at Courtland High School.**
- 2. Have been accepted at a trade school, vocational training or college after graduation from Courtland High School.**
- 3. Turn-in a completed scholarship application, along with copy of your college acceptance letter to the school guidance department no later than March 23, 2018.**

Last Name	First Name	Middle Name
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Present Address	Street	City	State	Zip
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Permanent Address	Street	City	State	Zip
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Home Phone Number	Last 4 of SSN
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Mobile Phone Number	Email Address
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FAMILY INFORMATION • Parent(s) or Guardian

Parent(s) or Guardian's Last Name First Name Middle Name

Street Address City State Zip

PERSONAL INFORMATION • Applicant

Male
 Female

Date of Birth: _____
Month/Day/Year

Current GPA: _____ SAT and/or other standard test scores: _____

Name of College you plan to attend: _____

Major: _____ Full time Student Part-time Student

Check only if you plan to continue playing sports in college.

College Student ID _____ (If scholarship is awarded, this information will be used to deposit funds into your college account)

ANSWER EACH QUESTION BELOW AND SUBMIT WITH APPLICATION

(Limit one page per question on standard size paper, typed and double spaced. Add full name at top right corner of each page)

1. Describe your career interest and why this scholarship will contribute to you completing your goals.
2. Describe any community and/or public service activities you participated in or initiated in the past 3 years.
3. What was your most significant accomplishment or challenge while participating in High School sports?



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High School Sport

Years Participated

Awards Received

CERTIFICATIONS

ATHLETIC DIRECTOR

To the best of my knowledge, the information provided is complete and correct.

Athletic Director Signature

Date

PARENT OR GUARDIAN

To the best of my knowledge, the information provided is complete and correct.

Parent or Guardian Signature

Date

APPLICANT

I hereby acknowledge that the information submitted herewith is true and correct.

Applicant Signature

H.S. Student Number

Date