

# GREATER JACKSON BUSINESS ALLIANCE SCHOLARSHIP

## SCHOLARSHIP APPLICATION

**DIRECTIONS:**

Please provide all the information requested. Include two letters of recommendation, one academic and one personal along with a completed application. Mail completed forms to:

*Greater Jackson Business Alliance, Inc.  
Attn: Scholarship Committee  
P.O. Box 410  
Jackson, WI 53037*

OR EMAIL TO ONE OF THE COMMITTEE/SELECTION COMMITTEE MEMBERS:

**Brad Otto:**            [brad.otto@p3ctech.com](mailto:brad.otto@p3ctech.com)  
                              **262-385-6374**

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If you have additional questions please contact one of the committee members listed above. **DEADLINE IS JUNE 1st**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Applicants must reside within the following boundaries:

**South of County Hwy NN**

**North of Pioneer Road**

**West of the Washington/Ozaukee County Line**

**East of Scenic Rd.**

Are you related to a member of the GJBA? Y N If yes, who? \_\_\_\_\_

Grade Point Average (through 7 semesters): \_\_\_\_\_ (**minimum 3.0**)  
(Attach a copy of your transcript)

FAFSA Expected Family Contribution (EFC): \_\_\_\_\_

University/College/Technical College you plan to attend:

\_\_\_\_\_

Area of intended study: \_\_\_\_\_

Anticipated cost for attending your future University/College/Technical College?

Tuition per year \$ \_\_\_\_\_ Books \$ \_\_\_\_\_

Room and Board \$ \_\_\_\_\_ Transportation \$ \_\_\_\_\_

**TOTAL ESTIMATED COST PER YEAR \$ \_\_\_\_\_**

List some of your interests and activities during the past four years:

List any awards you may have received and/or offices you held during the past four years:

What types of employment have you had while in high school?

Describe your involvement in community service, activities or projects:

Who or what has most influenced your development and describe how:

Please explain why you want to continue your education and how a scholarship would help you obtain your educational and career goals:

Include any additional information which you feel will help the scholarship committee evaluate your application: i.e. references, etc:

**\*\*An in-person interview may be scheduled with each applicant to discuss their application\*\***

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent(s)

\_\_\_\_\_  
Date