## 2023 Dunnigan and Jacobs Scholarship Application

(Sponsored by Dunnigan and Jacobs Foundation)

**If any items are omitted	d, applications will be deemed i	ncomplete and wil	I not be considered**
***TYPE OR PRINT LEGIBL	Y***		
PART I – APPLICANT INFO	RMATION NAME		
LAST	FIRST	MIDDLE	
ADDRESS	CITY	STATE	ZIP CODE
EMAIL ADDRESS	PHONE NUMBER	DATE OF BIRTH	
SCHOOL CURRENTLY ATTE **Please attach a copy of	ENDING CUMULA your transcript or progress rep	ATIVE GRADE POIN ort from the last se	
CHURCH AFFILIATION	YEARS (	YEARS OF MEMBERSHIP	
PART II – ACCEPTED/ENRO	DLLED TWO -OR FOUR - YEAR C	OLLEGE/TECH INFC	DRMATION
NAME OF SCHOOL			
ADDRESS			
INTENDED MAJOR / CARE	ER INTEREST		

PART III – SCHOOL/WORK/LEADERSHIP/COMMUNITY SERVICE

On a separate sheet, list all awards, community service, leadership roles, school and work-related activities participated in during Freshman, Sophomore, Junior and Senior years. Please specify each year of participation, and position/office held.

<b>PART</b>	IV -	<b>ESSAY</b>
PART	IV –	ESSAY

Write a one (1) page essay detailing your future goals and interests. Essay MUST be typed (maximum one page). Attach a recent photo of yourself.

PART V – SIGNATURES (Application must be signed by the student and parent/guardian)

All documents requested above should be submitted by Sunday, April 30, 2023, electronically to: <a href="mailto:dunniganandjacobsfoundation@gmail.com">dunniganandjacobsfoundation@gmail.com</a>

I HEREBY CERTIFY that all statements made herein, and on all attachments, are true and correct to the best of my knowledge.

I hereby give the Dunnigan and Jacobs Foundation permission to utilize my name, likeness, and award amount in publicity and/or marketing materials.

Print Name	Signature	Date
STUDENT:		
Print Name	Signature	Date
PARENT/LEGAL GUARDIAN:		
Print Name	Signature	Date