



Jordan Garber Scholarship

Application Form

Application Deadline: April 24, 2009

Eligibility

- Candidate must have participated at least two (2) years on a varsity cheerleading squad
- Candidate must be in good standing (character, citizenship & academics) with Harrisonburg High School
- Candidate must be a member of the current graduating class of Harrisonburg High School
- Candidate must be planning to attend and have applied to an accredited college/university

Guidelines

- Amount of the Scholarship: \$1,000
- Scholarship funds must be used for college expenses
- Payment will be made to the college
- Verification of college acceptance must be provided before scholarship funds are awarded

Instructions

- Complete the application and include the following:
 - A type-written essay of 500 words or less describing how your cheerleading experience influenced your life and outlook on life, why you are applying for the scholarship, and what your career goals are.
 - A letter of recommendation from a teacher at Harrisonburg High School.
 - An official copy of your current high school transcript

General Information _____

Name: _____ SSN#: _____

Address: _____

City: _____ Zip: _____

Phone: _____ Email: _____

Parent(s) or Guardian (s): _____

College or University you plan to attend: _____

Have you been accepted? _____

Activities _____

List community activities/experiences:

Organization	Offices Held	School Years	Hrs/Wk

List Honors Received:

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List work experiences:

Employer	Type of Work	Hrs/Wk	Date of Employment

List school activities/clubs/experience:

Organization	Offices Held	Description of Duties	Years

Signatures

I have read the regulations pertaining to the Jordan Garber Scholarship.

(Signature of Applicant)

(Date of Application)

TO BE COMPLETED BY PARENT OR GUARDIAN:

I have read this application and certify that information given here is correct. I believe that the applicant is serious in intent to complete a college education and with the help of the scholarship grant will be able to finance it.

Other Comments:

(Signature of Parent or Guardian)

(Date of Application)

I have reviewed the application and to the best of my knowledge all information is accurate.

School Administration Support Form _____

(TO BE COMPLETED BY GUIDANCE DEPARTMENT)

Student Name: _____

Size of Graduating Class: _____ Class Rank: _____

GPA: _____ Scale: _____

Indicate below your understanding of the individual's likelihood to complete college and other supporting information:

Attach a transcript of the student's high school record.

(Signature of Guidance Counselor)

(Date)

I have reviewed the application and to the best of my knowledge all information is accurate.

(Signature of High School Principal)

(Date)

I have reviewed the application and to the best of my knowledge all information is accurate

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HARRISONBURG EDUCATION FOUNDATION
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