



Jhanae Sunflower Foundation Scholarship

DEMOGRAPHICS			
First name:		Last Name:	
Date of Birth:	Gender:	Country of Citizenship:	
E-mail address:		Alternate Email Address	
Address (No P.O. Box accepted and must be permanent U.S resident)			
Address:			
Apt Number:	City:	State:	Zip Code:
CONTACT INFORMATION			
Home:		Cell/Mobile:	
Alternate Contact Name:		Alternate Phone Number:	
EDUCATION			
College/University to which you have applied			
1 st choice		Accepted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
2 nd choice		Accepted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
3 rd choice		Accepted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a high school senior, or student with a GED, entering college as a freshman at an accredited 4 year institution and enrolled full time for the 2023/2024 academic school year?			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
High School Information			
High School Name:			
Graduation date:	Cumulative GPA: _____ (Minimum 3.0, transcript required)		
Additional High School Information			
High School Name:			
Dates Attended:		Cumulative GPA:	
Did you earn your GED? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, date:			
Where did you earn your GED?			
Current College/ University Information			
College/ University Name:			
Graduation date:	Cumulative GPA: _____ (Minimum 3.0, transcript required)		
Additional College/ University Information			
College/ University Name:			
Dates Attended:		Cumulative GPA:	
Did you earn your college degree? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, date:			
Where did you earn your college degree?			

LEADERSHIP

Leadership abilities are required for this scholarship

Leadership Information

(1) Name of Organization:

Title or Position(s) held

Year

Description of Activities

(2) Name of Organization:

Title or Position(s) held

Year

Description of Activities

(3) Name of Organization:

Title or Position(s) held

Year

Description of Activities	
(4) Name of Organization:	
Title or Position(s) held	Year
Description of Activities	
(5) Name of Organization:	
Title or Position(s) held	Year
Description of Activities	

[illegible]

Dates:
(2) Name of Organization
Contact Person Name and Number:
Total amount of hours:
Describe your duties or responsibilities:
Dates:
(3) Name of Organization
Contact Person Name and Number:
Total amount of hours:
Describe your duties or responsibilities:
Dates:
(4) Name of Organization
Contact Person Name and Number:
Total amount of hours:
Describe your duties or responsibilities:



Essay (Min 250- words-Max of 500 words):

Jhanae was very aware of social issues. With this being an election year, what social issues are you passionate about and why?



Authorization

All winners will be featured on our website jhanaesunflowerfoundation.org. We wish to acknowledge every potential candidate for their accomplishments and interest in our foundations scholarship.

Do you give permission for Jhanae Sunflower Foundation to use your photo, likeness, video and/or name and information on our website for promotional and informational purposes only?

☐ Yes ☐ No

X

Signature required (18 and over)

X

Signature of parent if under 18 years old (required)

Date: