



# Scholarship Application

This scholarship is open to student athletes graduating from high school who plan on attending post-secondary university, college, or vocational school. This scholarship is awarded by committee selection to a student who exemplifies qualities modeled by Jack Reynolds: scholarship, sportsmanship, integrity, dedication and mentorship.

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

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

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

Parent or Guardian Name(s): \_\_\_\_\_

Phone (If different from above): \_\_\_\_\_

Address (If different from above): \_\_\_\_\_

How will you utilize this scholarship?      University      College      Vocational

Where do you plan to attend?

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

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

To complete this application, please include the following:

**PLEASE NO STAPLES**

- 1. **A resume' for grades 9-12, which describes:**
  - a) Honors you have received (Academic / Athletic)
  - b) Co-curricular activities and positions of leadership you have held
  - c) Community and school service / volunteer activities
  - d) Work Activities (if any)
  
- 2. **An essay on how School or Athletics has affected you.** Essay should speak to each of Jack's attributes that you exemplify:
  - a) Scholarship, Sportsmanship, Integrity, Dedication, and Mentorship.

3. Attach a letter of recommendation from at least one of the following: Advisor, Principal, Athletic Director, or Head Coach.
4. Sealed High School transcript.

**Please sign below and return this cover sheet with your Resume', Essay, Letter(s) of Recommendation, and current High School transcript to The Jack Reynolds Scholarship Fund. All applications must be postmarked on or before **March 15th**. Late applications will not be accepted.**

*I certify that all information provided in this scholarship application is true and to the best of my knowledge. Also, I understand that all decisions made by The Jack Reynolds Scholarship Fund committee are final and not subject to review or appeal. I further understand that any information provided in this form may be shared with committee members of the sponsoring scholarship.*

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Student Name (print)

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Student Signature Parent signature if student is under 18 years of age

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Date

**Application Materials to be mailed to:**

The Jack Reynolds Scholarship Fund  
P.O. Box 294  
Renton, WA 98057-0294

If there are questions, please contact The Jack Reynolds Scholarship Fund

Email: [tjrfsf2008@gmail.com](mailto:tjrfsf2008@gmail.com)

Phone: (877) 397-6962 ext 8

Website: <http://www.jackreynoldsscholarshipfund.org/>

