

## Roy C. Jackson Scholarship

## **Scholarship Application**

Personal Information				
Full Name:				
	Last	First		M.I.
Address:				
	Street Address			Apartment/Unit #
	City		State	ZIP Code
Contact Number:_	E	mail Address:		
Graduate of:	_			
Number of Years	in Active Match:	_		
		College Information		
Assented College		-		
Accepted College				
Address:				
	Street Address			Apartment/Unit #
	City		State	ZIP Code
Intended Major	-	Intended		
Or Undeclared:		Semester to begin:		
Signature:			D	ate:

**Prompt:** Please describe your experiences in our BBBS mentoring program and how these experiences affected you in your life choices. Please be detailed in your statement. Take the time to really reflect on what this experience has meant to you. Responses should be at least a page in length. We ask that you either write legibly or type your response below. Thank you. Please continue on the back as necessary.