**SAN JUAN HILLS HIGH SCHOOL PTSA**

**2024-2025 SCHOLARSHIP APPLICATION**

### **The San Juan Hills High School PTSA is pleased to offer a scholarship program for graduating seniors.  This PTSA scholarship is to be used for continuing education at a four-year College or University, a Community College or a Trade/Technical school.**

***This award recognizes the achievements of students for volunteer service in the school and/or community.***

The amount of each scholarship and the number of scholarships awarded will vary each year.

**ELIGIBILITY**

* Applicant must be a graduating senior of San Juan Hills High School in the current school year.
* Applicant must already be a member of the SJHHS PTSA.

**TO APPLY**

* Complete application including essay, record of extra-curricular activities and reference.  Your parent or guardian must sign the application.
* ***The application and all attachments should be turned in to the SJHHS Guidance Office by Tuesday, April 15, 2025 @ 3:20pm.***

**NOTIFICATION**

SJHHS PTSA will contact all successful applicants no later than **May 15, 2025**.  The decision of the SJHHS PTSA Scholarship Committee is final.

**PAYMENT OF AWARD**

Payment of award(s) will be made directly to the successful applicant upon verification the student has been accepted at an institution of higher education.  In order to receive your scholarship during the **Senior Awards Ceremony on May 20, 2025**, we must receive ***verification of enrollment by May 18, 2025***. Otherwise, the award will be mailed to you at the address listed on your application. **Note:**  A scholarship award may be revoked if the student is subject to severe disciplinary action such as suspension or expulsion, or if the student fails to enroll in an institution of higher education.

**QUESTIONS**

If you have any questions about the SJHHS PTSA Scholarship Program, please contact Shawnn Smark @ shawnnsmark@gmail.com or 760-717-2081.

### SAN JUAN HILLS HIGH SCHOOL PTSA

### 2024-2025 SCHOLARSHIP APPLICATION

***Please type or print in black ink.  Be as complete as possible.***

### **GUIDELINES FOR SCHOLARSHIP**

* Complete application including essay, record of extra-curricular activities and reference.  Your parent or guardian must sign the application.
* Applicant must be a current member of the SJHHS PTSA.

***Completed application and all attachments must be turned in to the SJHHS Guidance Office by Tuesday, April 15, 2025 @ 3:20pm.***

### **PART 1.   GENERAL INFORMATION**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### **PART 2.   FAMILY INFORMATION**

Father’s / Guardian’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s / Guardian’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

You live with   Father     Mother     Both

Number of additional children living at home \_\_\_\_\_\_\_\_\_\_

Number of siblings currently attending college \_\_\_\_\_\_\_\_\_\_

### **PART 3.   ACTIVITIES RECORD**

Complete the Record of Extra Curricular Activities form attached, (Attachment A,) including only the activities in which you participated during high school. Please also include only volunteer community/school activities, not activities for which you were paid. If necessary, you may attach additional copies of the form.

**PART 4.   POST HIGH SCHOOL PLANS**

Applied to:

Name of College/University/Vocational School                      Accepted (if known)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major and/or Career Objective:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### **PART 5.   ESSAY**

On a separate sheet of paper, write a short essay, not to exceed one (1) page (SJHHS English Dept. MLA Format), about your personal experience at San Juan Hills High School.  Explain how this has influenced you as an individual.

### **PART 6.   LETTER OF RECOMMENDATION**

Please attach only one letter of recommendation which will help the Scholarship Committee learn more about you. This letter may be written by a school administrator, teacher, guidance counselor, employer, volunteer leader, troop leader, coach, religious leader, etc. This letter may not be written by a relative.

### **PART 7.   EMPLOYMENT**

Employment experience, if any.

Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates:   from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Duties\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates:   from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Duties\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### **SIGNATURES**

I verify that the information in this application is true and correct.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student’s Signature                                                                                      Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent’s/Guardian’s Signature                                                                      Date

**ATTACHMENT A**

**RECORD OF EXTRA-CURRICULAR ACTIVITIES**

**(Duplicate as needed)**

| **Activity Name:**  |
| --- |
| **Grade(s)/Year(s) Participated:** |
| **Position or Office Held:** |
| **Hours per Week:** |
| **Weeks per Year:** |
| **Awards:** |
| **Name, Address & Phone Number of Person or Organization who can verify:**  |
| **Describe Activity:** |

| **Activity Name:**  |
| --- |
| **Grade(s)/Year(s) Participated:** |
| **Position or Office Held:** |
| **Hours per Week:** |
| **Weeks per Year:** |
| **Awards:** |
| **Name, Address & Phone Number of Person or Organization who can verify:**  |
| **Describe Activity:** |

| **Activity Name:**  |
| --- |
| **Grade(s)/Year(s) Participated:** |
| **Position or Office Held:** |
| **Hours per Week:** |
| **Weeks per Year:** |
| **Awards:** |
| **Name, Address & Phone Number of Person or Organization who can verify:**  |
| **Describe Activity:** |