**SCHOLARSHIP FOUNDATION**

**OF**

**JOHN F. KENNEDY HIGH SCHOOL**

**La Palma Intercommunity Hospital Healthcare Scholarship - One at $1,000**

**SECTION I - APPLICANT INFORMATION**

1. Applicant will graduate May 2025 from John F. Kennedy High School in La Palma, California, and will have attended the school for at least one year prior to the application deadline.

2. The applicant must meet the following criteria:

1. Plan to attend a Post-Secondary school **full-time** in 2025-2026
2. Has a minimum cumulative GPA of 3.0.
3. Plans to major in the healthcare field (nursing, radiology, lab tech., doctor, etc.)
4. Complete the Scholarship Application packet of the JFK Scholarship Foundation which

includes:

1. Scholarship Application (on-line website).
2. A personal statement describing your educational goals (email with application).
3. Academic transcript. (request from Counseling office)
4. Two Academic Letters of Recommendation. (request from classroom teachers)
5. Volunteer Supervisor letter(s) of Recommendation.
6. Extra-Curricular Activities Worksheet.
7. Interview (to be scheduled on campus).
8. Only one scholarship from the Foundation per applicant will be awarded.
9. A recognition dinner will be held on April 26th, which you will be expected to attend.
10. The scholarship certificate will be awarded at the Senior Awards Night.

6. The scholarship check will be issued when **proof of registration to a post-secondary**

**institution of higher learning** is received by the Foundation from the award winner, no

later than December 31, 2025.

**How to apply:** Log-in to https://www.jfkscholarshipfoundation.org, select the “Scholarships” button and click on Apply, then select which scholarship(s) you want to apply for and follow the directions at the bottom of the page. Send the application and appropriate forms to the Foundation via email. Be sure to read the information page **How to Use the Extra-Curricular Activities Worksheet. Email** to:

[JFKSCHOLARSHIPFOUNDATION@HOTMAIL.COM](mailto:JFKSCHOLARSHIPFOUNDATION@HOTMAIL.COM)

Application information is also available in the Counseling Center. Be sure to arrange to have all the supporting materials sent to the Scholarship Foundation by **January 11, 2025.** Verify that all of your supporting materials have been sent - **NO APPLICATION WILL BE CONSIDERED UNTIL ALL SUPPORTING MATERIALS ARE RECEIVED.** Personal interviews with applicants will be conducted during March, and Scholarship awards will be announced shortly thereafter.

**SECTION II - CHECKLIST**

***Follow these instructions carefully. Save this and use it as a checklist as you complete your application.***

\_\_\_ Complete the **SCHOLARSHIP APPLICATION (SECTION III)**. Sign and the date on the back page, attach your Personal Statement and Extra-Curricular Activities Worksheet, and email them separately (unless it’s a 2 page document) to the Foundation. ***Do not send a string of files.***

\_\_\_ Write a **PERSONAL STATEMENT** **(SECTION IV)** and include it with your application. Develop it with thoughtful care. Use **Times New Roman font size 10** (this is that font & size), **double-spaced**. The length of your statement must be **no more than one page**. The Scholarship Committee places **great emphasis** on Personal Statements as the best vehicle to learn about what is important to each applicant and why, and as an indicator of writing ability (that is, the ability to provide the requested content clearly, expressively, and in proper grammatical/structural form, including accurate spelling and punctuation). **To obtain the maximum points on your Personal Statement the above must be adhered to, and the following five (5) points need to be addressed in your statement**:

**1) Tell us about your goals and how your post-secondary education will help you achieve them;**

**2) Explain why the goals in #1 above are important to you;**

**3) Explain how and why you believe you will achieve these goals;**

**4) Why did you select your school;**

**5) *WHY YOU WANT TO BE IN THE HEALTHCARE FIELD SHOULD BE A MAIN TOPIC*** (nursing, radiology, lab tech., doctor, etc.) (include supporting information when possible**).**

(**SUGGESTION**: Use spell-check for reviewing spelling and grammar. Have someone else review your statement. Be sure to provide them these instructions.)

**Be sure that your name is on the Personal Statement paper.**

\_\_\_ Submit ***two* ACADEMIC RECOMMENDATION FORMS (SECTION V)**. These recommendations must be from classroom ***teachers***. At least one should be from a current teacher. **Email or** p**rint two “Confidential Academic Recommendation”** forms and give them to two different teachers. Have the ***teachers*** fill out the form and email it to the Foundation.

\_\_\_ Submit one or more **EMPLOYER/SUPERVISOR RECOMMENDATION FORMS (SECTION VI)** from a recent employer or supervisor**. Email or** p**rint the “Confidential Recommendation from Employer or Volunteer Supervisor”** form and give it to the appropriate person. This is either from a company where you are paid to work, or from an organization where you volunteer your time ***off campus***. If you have not worked, but you have served as a volunteer off campus, have the organization fill out the form and email it to the Foundation. \_\_\_ Submit your **ACADEMIC TRANSCRIPT (SECTION VII)**. Arrange to have the High School send an official copy of your transcript, including Fall 2024 grades, to the Scholarship Foundation. **Use the enclosed “High School Transcript Request”** form. The transcript should include 9th, 10th and 11th years' grades, and those from Fall of 12th grade. Grades should be sent as well for any classes taken at a Community College, or any other post-secondary school attended. Print this form and take to appropriate office for processing.

\_\_\_ Submit the **EXTRA-CURRICULAR ACTIVITIES WORKSHEET (SECTION IX)** with your application directly to the Foundation. Be careful when filling this out, so it is easily understood. Follow the guidelines on the sheet titled “How to Use the Extra-Curricular Activities Worksheet**”. Volunteering at school does not count.** (**SUGGESTION**: Have someone else review for clarity what you wrote.) **Be sure that your name is on this form**.

The above six items constitute 50% of your determined score. The other 50% is your interview.

\_\_\_ Prepare for your **INTERVIEW. Each qualified applicant may be interviewed.** The finalists for the scholarships are required to have a personal interview. Interviews are conducted between March 3rd - March 7th. Only qualified students with completed files will be interviewed, and it is your responsibility to check on the status of your supporting materials. ALL INTERVIEWS MUST BE COMPLETED BY March 7th.

**SECTION III – APPLICATION**

***Page 1 of 2: LP Intercommunity Hospital Healthcare Scholarship Application***

Two JFK scholarships can be applied for, but each require a separate application packet. For each application packet, select only one category from the below list and check your choice. Be sure to apply for as many scholarships as possible from other sources.

|  |  |
| --- | --- |
| * General Scholarship * John Alvis Memorial * Aragona Family * La Palma Community Foundation * La Palma Intercommunity Hospital * La Palma Kiwanis Community College * Eva Lutz Memorial | * Chris O’Neal Memorial * Patel Family * Glenn Taylor Memorial * Donald Widen Memorial |

**DEADLINE FOR APPLICATION – January 12, 2025**

* ***Read the “Application Instructions” sheet before starting this form.***
* ***Put your name on each supplemental sheet.***

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last, First, Middle Initial) (Last, First) (Mr. / Mrs. / Ms.)

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

(Street, City, State, Zip)

Birth Date:\_\_\_\_\_\_\_\_\_\_\_\_ Home Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Citizenship status: US Citizen\_\_\_\_ US Permanent Resident\_\_\_\_ Other (explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When did you start attending John F. Kennedy High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_(mo./yr. entered JFK)

Colleges to which you have applied, in order of preference:

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

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

Proposed major: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Proposed career: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Page 2 of 2: LP Intercommunity Hospital Healthcare Scholarship Application***

**Name (print) of applicant**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AWARDS/ACADEMIC HONORS**

*List honors attained from 9th to 12th grades.*

*If necessary, attach an additional 8 1/2" x 11" sheet.*

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award/Honor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Be sure to carefully read and use the* “How to Use the Extra-Curricular Activities Worksheet” *page when you are filling out the worksheet for paid employment, volunteering and school activities.***

**RECOMMENDATIONS**

*List names of Teachers and Employers who will be submitting your recommendations*.

Academic – Teachers (Required):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic -Teachers (Required):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer/Volunteer Supervisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION IV – CONFIDENTIAL ACADEMIC RECOMMENDATIONS**

***Page 1 of 2: Academic Recommendation***

**SCHOLARSHIP FOUNDATION**

**OF**

**JOHN F. KENNEDY HIGH SCHOOL**

**La Palma Intercommunity Hospital Healthcare Scholarship**

**Name of applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_

***You have been selected as a reference for the above named applicant.***

***We would appreciate your cooperation in helping us to evaluate this applicant’s qualifications.***

During which year did you teach/counsel the applicant?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What subject?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Or, in what context have you known the applicant?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please place a check mark at the points which represent your evaluation of this applicant in comparison with other college-bound students. If you have no fair basis for judgment, please check the last line per category.***

|  |  |
| --- | --- |
| **REASONING ABILITY**  \_\_\_ Exceptional critical judgment  \_\_\_ Clear thinking  \_\_\_ Average analytic ability  \_\_\_ Poor analytical ability  \_\_\_ No basis for judgment | **EMOTIONAL MATURITY**  \_\_\_ Mature, poised, confident  \_\_\_ Average maturity  \_\_\_ Immature  \_\_\_ No basis for judgment |
| **CREATIVE ABILITY**  \_\_\_ Exceptionally creative and original  \_\_\_ Adapts and uses new ideas readily  \_\_\_ Response to suggestions is average  \_\_\_ No basis for judgment | **REACTIONS TO CRITICISM**  \_\_\_ Accepts correction  \_\_\_ Resents criticism  \_\_\_ No basis for judgment |
| **WRITING ABILITY**  \_\_\_ Excellent writing skills  \_\_\_ Above average writing skills  \_\_\_ Average written expression  \_\_\_ Poor writing ability  \_\_\_ No basis for judgment | **DEPENDABILITY AND INTEGRITY**  \_\_\_ Absolutely reliable  \_\_\_ Dependable in most cases  \_\_\_ Average dependability  \_\_\_ Questionable dependability  \_\_\_ No basis for judgment |
| **ACCURACY OF WORK**  \_\_\_ Exceptionally accurate  \_\_\_ Makes only minor mistakes  \_\_\_ Satisfactory accuracy  \_\_\_Careless  \_\_\_ No basis for judgment | **INITIATIVE AND INDUSTRY**  \_\_\_ Self-starter  \_\_\_ Works with little supervision  \_\_\_ Average initiative  \_\_\_ Requires excessive direction  \_\_\_ No basis for judgment |

***Page 2 of 2: Academic Recommendation***

**Name of applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **ACADEMIC ABILITY**  \_\_\_ Superior  \_\_\_ Very Good  \_\_\_ Poor  \_\_\_ No basis for judgment | **ORAL EXPRESSION**  \_\_\_ Superior  \_\_\_ Very Good  \_\_\_ Poor  \_\_\_ No basis for judgment | **WORK HABITS**  \_\_\_ Superior  \_\_\_ Very Good  \_\_\_ Poor  \_\_\_ No basis for judgment |

What has been the applicant's greatest strength? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

What has been the applicant's greatest weakness? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Your overall recommendation for this applicant to receive a scholarship (Please check one):**

|  |  |
| --- | --- |
| \_\_\_ Very highly recommended  \_\_\_ Highly Recommended  \_\_\_ Recommended | \_\_\_ Recommended with reservation  \_\_\_ Not recommended |

**ADDITIONAL COMMENTS:** (Your comments are important. Please expand on what you know about the applicant and your overall recommendation of this applicant. Feel free to respond on a separate 8 1/2" X 11" sheet.)

YOUR SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUR NAME (Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUR TITLE / SUBJECT TAUGHT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If you are sending more than one recommendation, please email them in separate files. Thank you!**

**Please email this form DIRECTLY to:**

**SCHOLARSHIP FOUNDATION OF JOHN F. KENNEDY HIGH SCHOOL**

**P.O. Box 1371, Cypress, CA 90630**

**Email to:** [**JFKSCHOLARSHIPFOUNDATION@HOTMAIL.COM**](mailto:JFKSCHOLARSHIPFOUNDATION@HOTMAIL.COM)

**DEADLINE IS January 11, 2025**

***PLEASE NOTE: Due to our limited funds, competition is keen for our scholarships. Our Selection Committee pays a great deal of attention to your evaluation of the applicant in order to assess all of the candidates fairly****.* ***Please take a moment to complete this form so that the student will have the benefit of your appraisal.***

**SECTION V – CONFIDENTIAL ACADEMIC RECOMMENDATIONS**

***Page 1 of 2: Academic Recommendation***

**SCHOLARSHIP FOUNDATION**

**OF**

**JOHN F. KENNEDY HIGH SCHOOL**

**La Palma Intercommunity Hospital Healthcare Scholarship**

**Name of applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_

***You have been selected as a reference for the above named applicant.***

***We would appreciate your cooperation in helping us to evaluate this applicant’s qualifications.***

During which year did you teach/counsel the applicant?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What subject?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Or, in what context have you known the applicant?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please place a check mark at the points which represent your evaluation of this applicant in comparison with other college-bound students. If you have no fair basis for judgment, please check the last line per category.***

|  |  |
| --- | --- |
| **REASONING ABILITY**  \_\_\_ Exceptional critical judgment  \_\_\_ Clear thinking  \_\_\_ Average analytic ability  \_\_\_ Poor analytical ability  \_\_\_ No basis for judgment | **EMOTIONAL MATURITY**  \_\_\_ Mature, poised, confident  \_\_\_ Average maturity  \_\_\_ Immature  \_\_\_ No basis for judgment |
| **CREATIVE ABILITY**  \_\_\_ Exceptionally creative and original  \_\_\_ Adapts and uses new ideas readily  \_\_\_ Response to suggestions is average  \_\_\_ No basis for judgement | **REACTIONS TO CRITICISM**  \_\_\_ Accepts correction  \_\_\_ Resents criticism  \_\_\_ No basis for judgment |
| **WRITING ABILITY**  \_\_\_ Excellent writing skills  \_\_\_ Above average writing skills  \_\_\_ Average written expression  \_\_\_ Poor writing ability  \_\_\_ No basis for judgment | **DEPENDABILITY AND INTEGRITY**  \_\_\_ Absolutely reliable  \_\_\_ Dependable in most cases  \_\_\_ Average dependability  \_\_\_ Questionable dependability  \_\_\_ No basis for judgment |
| **ACCURACY OF WORK**  \_\_\_ Exceptionally accurate  \_\_\_ Makes only minor mistakes  \_\_\_ Satisfactory accuracy  \_\_\_Careless  \_\_\_ No basis for judgment | **INITIATIVE AND INDUSTRY**  \_\_\_ Self-starter  \_\_\_ Works with little supervision  \_\_\_ Average initiative  \_\_\_ Requires excessive direction  \_\_\_ No basis for judgment |

***Page 2 of 2: Academic Recommendation***

**Name of Applicant** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **ACADEMIC ABILITY**  \_\_\_ Superior  \_\_\_ Very Good  \_\_\_ Poor  \_\_\_ No basis for judgment | **ORAL EXPRESSION**  \_\_\_ Superior  \_\_\_ Very Good  \_\_\_ Poor  \_\_\_ No basis for judgment | **WORK HABITS**  \_\_\_ Superior  \_\_\_ Very Good  \_\_\_ Poor  \_\_\_ No basis for judgment |

What has been the applicant's greatest strength? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

What has been the applicant's greatest weakness? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Your overall recommendation for this applicant to receive a scholarship (Please check one):**

|  |  |
| --- | --- |
| \_\_\_ Very highly recommended  \_\_\_ Highly Recommended  \_\_\_ Recommended | \_\_\_ Recommended with reservation  \_\_\_ Not recommended |

**ADDITIONAL COMMENTS:** (Your comments are important. Please expand on what you know about the applicant and your overall recommendation of this applicant. Feel free to respond on a separate 8 1/2" X 11" sheet.)

YOUR SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUR NAME (Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUR TITLE / SUBJECT TAUGHT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**If you are sending more than one recommendation, please email them in separate files. Thank you!**

**Please return this form DIRECTLY to:**

**SCHOLARSHIP FOUNDATION OF JOHN F. KENNEDY HIGH SCHOOL**

**P.O. Box 1371, Cypress, CA 90630**

**Email to:** [**JFKSCHOLARSHIPFOUNDATION@HOTMAIL.COM**](mailto:JFKSCHOLARSHIPFOUNDATION@HOTMAIL.COM)

**DEADLINE IS January 11, 2025**

***PLEASE NOTE: Due to our limited funds, competition is keen for our scholarships. Our Selection Committee pays a great deal of attention to your evaluation of the applicant in order to assess all of the candidates fairly****.* ***Please take a moment to complete this form so that the student will have the benefit of your appraisal.***

**SECTION VI – EMPLOYER OR VOLUNTEER RECOMMENDATION**

***Page 1 of 2: Employer/Volunteer Recommendation***

**SCHOLARSHIP FOUNDATION**

**OF**

**JOHN F. KENNEDY HIGH SCHOOL**

**La Palma Intercommunity Hospital Healthcare Scholarship**

**CONFIDENTIAL RECOMMENDATION**

**FROM EMPLOYER OR VOLUNTEER SUPERVISOR**

(Volunteering at school does not count)

**DEADLINE IS January 11, 2025**

**Name of Applicant** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What was/is applicant’s job title?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of business \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When was the applicant employed (volunteering) by (for) you?

#Weeks employed summer vacation: Between: Sophomore-Junior \_\_\_\_\_\_\_\_; Junior-Senior \_\_\_\_\_\_\_\_

Hours per week: Between: Sophomore-Junior \_\_\_\_\_\_\_\_; Junior-Senior \_\_\_\_\_\_\_\_

#Weeks employed school year: Junior \_\_\_\_\_\_\_\_; Senior \_\_\_\_\_\_\_\_

Hours per week: Junior \_\_\_\_\_\_\_\_; Senior \_\_\_\_\_\_\_\_

What was your relationship to the applicant? (Check all that apply):

\_\_\_ Employer \_\_\_ Manager \_\_\_ Pers. Director\_\_\_ Supervisor\_\_\_Other - (explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**Please place check marks at the points which represent your evaluation of the applicant.**

**If you have no fair basis for judgment, please check the last line per category.**

|  |  |
| --- | --- |
| I**NITIATIVE AND INDUSTRY**  \_\_\_ Self-starter  \_\_\_ Works with little supervision  \_\_\_ Average initiative  \_\_\_ Requires excessive direction  \_\_\_ No opportunity to observe | **EMOTIONAL MATURITY**  \_\_\_ Mature, poised, confident  \_\_\_ Average maturity  \_\_\_ Immature  \_\_\_ No basis for judgment |
| **DEPENDABILITY AND INTEGRITY**  \_\_\_ Absolutely reliable  \_\_\_ Dependable in most cases  \_\_\_ Average dependability  \_\_\_ Questionable dependability  \_\_\_ No basis for judgment | **REACTIONS TO CRITICISM**  \_\_\_ Accepts correction  \_\_\_ Resents criticism  \_\_\_ No basis for judgment |

***Page 2 of 2: Employer/Volunteer Recommendation***

**WORK HABITS:**

\_\_\_ Superior \_\_\_ Good \_\_\_ Average \_\_\_ Below Average

**Name of Applicant** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of company or organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Was this a paid position? \_\_\_ YES \_\_\_ NO

What are the applicant’s job duties? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

What has been the applicant's greatest strengths? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

What has been the applicant's greatest weakness? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Would you want this person to work/volunteer for you again? \_\_\_ YES \_\_\_ NO

If you would like to share more information about the applicant, please do so on your letterhead.

**If you are sending more than one recommendation, please email them in separate files. Thank you!**

SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

YOUR NAME PRINT (Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMPANY NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email this form **DIRECTLY** to:

**SCHOLARSHIP FOUNDATION OF JOHN F. KENNEDY HIGH SCHOOL**

**P.O. Box 1371, Cypress, CA 90630**

**Email to:** [**JFKSCHOLARSHIPFOUNDATION@HOTMAIL.COM**](mailto:JFKSCHOLARSHIPFOUNDATION@HOTMAIL.COM)

**DEADLINE IS January 11, 2025**

**SECTION VII – TRANSCRIPT REQUEST**

**SCHOLARSHIP FOUNDATION**

**OF**

**JOHN F. KENNEDY HIGH SCHOOL**

**HIGH SCHOOL TRANSCRIPT REQUEST**

|  |
| --- |
| **TO THE APPLICANT:** Please complete this form and give it to your high school registrar immediately. Action will not be taken on your application until we have received a transcript of your grades, which must include the Fall 2024 semester. Copy this completed form and send with other forms to the Foundation. |

|  |
| --- |
| **TO THE REGISTRAR:** After Fall 2024 grades have been posted, ***please hold in the Counseling Center for pick-up.*** |

Today's date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Present Grade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth date: \_\_\_\_\_\_\_\_\_\_\_\_

Please list the subjects that you are now taking during the second semester. List correct titles and show the levels (such as, 'Spanish 5', 'Pre-Calculus HP').

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

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

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

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

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

6.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION VIII – ACTIVITIES WORKSHEET**

**INSTRUCTIONS:**

**Follow instructions below:**

Use the “EXTRA-CURRICULAR ACTIVITIES WORKSHEET” to list your paid employment jobs, your non-paid volunteer jobs, and your school activities. Accurate information is important. Use as many pages as needed.

**Paid Employment** (Junior and Senior years only)

Include summer jobs as well as jobs during the school year. Keep the summer job information separate from the school year jobs when filling in the worksheet. The summer information would be for the time between grades: your Junior summer is between 10th & 11th grades, and your Senior summer is between 11th & 12th grades.

Junior summer maximum number of weeks = 11.2; Senior summer maximum number of weeks = 10.8.

Junior school year maximum number of weeks = 41.6; Senior school year maximum number of weeks = 22.6.

**Volunteering** (Junior and Senior years only)

Volunteer positions are jobs where you are ***not paid*** for the time spent doing the specified work. **This volunteer work is not related to a school activity or performed on campus**, but rather a situation where you are working within the tri-communities (Buena Park, Cypress, La Palma – there can be exceptions to the list of cities) performing work for a city (i.e., park & rec., police dept., etc.), library, hospital, other healthcare organization, animal shelter, or other non-profit organization (this is not a total list of possible volunteer opportunities). If a club such as KEY Club performs off-campus volunteering, this can be included. The following is the maximum number of weeks per school year you were able to volunteer.

Junior summer maximum number of weeks = 11.2; Senior summer maximum number of weeks = 10.8.

Junior school year maximum number of weeks = 41.6; Senior school year maximum number of weeks = 22.6.

**School Activities** (Freshman, Sophomore, Junior, Senior)

School activities include after-school sports (football, track, soccer, etc.), the arts (band, choir, visual arts, dance, etc.), ASB, school clubs and organizations such as speech & debate, school newspaper, peer court, cheer, FBLA, NHS, RESET, HOSA, etc. The maximum number of weeks for each school year is:

Freshman Yr = 35.4 weeks; Sophomore Yr = 36.6 weeks; Junior Yr = 36.0 weeks; Senior Yr = 18.8 weeks

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**How to Determine the Number of Weeks**

**Paid Employment Example**: You worked 15 hours per week all summer during your Junior year (summer of 2023) =11.2 weeks @ 15 hrs; You worked 5 hours per week for the school year during your Junior school year = 41.6 weeks @ 5 hrs; You worked 20 hours per week all summer during your Senior year (summer of 2024) = 10.8 weeks @ 20 hrs. You would enter each of these numbers separately in an Activity box on the “Extra-Curricular Activities Worksheet” in the proper column, listing the volunteer activity and if it was the summer or school year under the activity.

**Volunteering Example**: Use the same above procedure to determine the number of weeks for your volunteering.

**Activities Example:** Freshman year in ASB = 35.4 weeks; Sophomore year in ASB = 36.6 weeks; Junior year in RESET for one semester = 18.0 weeks; Senior year in NHS, choir, FBLA each all year until application turn in = 18.8 weeks for each activity. List each of these activities and the number of weeks in the appropriate space on the worksheet.

**SECTIOIN IX - La Palma Intercommunity Hospital Extra-Curricular Activities Worksheet**

To determine how to calculate the number of weeks for the below 3 sections, see prior page for instructions.

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

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **PAID EMPLOYMENT**  **Identify Summer or School Yr.** | **Year Employed** | **# of Hours per Week** | **# of Weeks Employed** | **Point Calculation:** | **Year Employed** | **# of Hours per Week** | **# of Weeks Employed** |
| Employer & Job Descrip | Jr. Summer |  |  | Employer & Job Descrip | Jr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  |
|  | Sr. School Yr |  |  |  | Sr. School Yr |  |  |
| Employer & Job Descrip | Jr. Summer |  |  | Employer & Job Descrip | Jr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  |
|  | Sr. School Yr |  |  |  | Sr. School Yr |  |  |
| **OFF CAMPUS VOLUNTEERING (*On-Campus Does Not Count*)** | **Year Volunteer** | **# of Hours per Week** | **# of Weeks as a Volunteer** | **Point Calculation:** | **Year Volunteer** | **# of Hours per Week** | **# of Weeks as a Volunteer** |
| Organization & Activity | Jr. Summer |  |  | Organization & Activity | Jr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  |
|  | Sr. School Yr |  |  |  | Sr. School Yr |  |  |
| Organization & Activity | Jr. Summer |  |  | Organization & Activity | Jr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  |
|  | Sr. School Yr |  |  |  | Sr. School Yr |  |  |
| Organization & Activity | Jr. Summer |  |  | Organization & Activity | Jr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  |
|  | Sr. School Yr |  |  |  | Sr. School Yr |  |  |
| Organization & Activity | Jr. Summer |  |  | Organization & Activity | Jr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sr. Summer |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Jr. School Yr |  |  |
|  | Sr. School Yr |  |  |  | Sr. School Yr |  |  |
| **SCHOOL ACTIVITIES** | **Year Involved** | **# of Weeks** | **Position Held** | **Point Calculation:** | **Year Involved** | **# of Weeks** | **Position Held** |
| Activity | Freshman |  |  | Activity | Freshman |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sophomore |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sophomore |  |  |
|  | Junior |  |  |  | Junior |  |  |
|  | Senior |  |  |  | Senior |  |  |
| Activity | Freshman |  |  | Activity | Freshman |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sophomore |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sophomore |  |  |
|  | Junior |  |  |  | Junior |  |  |
|  | Senior |  |  |  | Senior |  |  |
| Activity | Freshman |  |  | Activity | Freshman |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sophomore |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sophomore |  |  |
|  | Junior |  |  |  | Junior |  |  |
|  | Senior |  |  |  | Senior |  |  |
| Activity | Freshman |  |  | Activity | Freshman |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sophomore |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sophomore |  |  |
|  | Junior |  |  |  | Junior |  |  |
|  | Senior |  |  |  | Senior |  |  |