



## Junior Civic League of Youngstown Scholarship Application

This scholarship is for a student enrolled full-time for the upcoming Fall Semester, of sophomore status (completed at least 31 semester hours), with a 3.0 GPA. Student should have at least one African-American parent.

Name: \_\_\_\_\_ Race/Ethnicity: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_ Student ID#: Y00: \_\_\_\_\_

Name of High School: \_\_\_\_\_ GPA: \_\_\_\_\_ ACT/SAT Score: \_\_\_\_\_

College Major: \_\_\_\_\_ GPA: \_\_\_\_\_ Hours Completed: \_\_\_\_\_

FAFSA Completed: Yes or No \_\_\_\_\_ Attending Full or Part Time: \_\_\_\_\_

Participation in clubs, organizations, and extracurricular activities:

Community/Volunteer Service:

Work Experience:

*Attach a personal statement regarding your academic and career goals (500-word limit-typed).*

*Attach three letters of recommendation.*

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*By signing this application, I agree to the release of financial, as well as, academic information to representatives of the above identified scholarship and the YSU Foundation.**

**Deadline to apply: June 15th**

Return application to: **YSU Foundation, 655 Wick Ave, Youngstown, Ohio, 44555**

Phone: 330-941-3156; Fax 330-941-1488