## George James Community Center, Inc. General Delivery Radiant, Virginia 22732 (540) 672-7138

### GJCC1215@hotmail.com

#### Dear Applicant:

Please complete the application form, along with **two** support letters and mail to the GJCC at the address listed below. Applications for the **AY 2020-21** period must be received by **Friday March 13, 2020.** Incomplete or illegible forms will not be accepted. Failure to adhere to guidelines could result in your application not being considered.

George James Community Center, Inc. General Delivery Radiant, VA 22732-9999 Attention: Educational Program Chair

#### **Requirements:**

- Applicant must be a High School Graduate, or hold GED Certification;
- Must have at least a 2.5 GPA;
- Completed application form;
- Two letters of recommendation. Should include: one letter from school guidance counselor and one letter from a teacher;
- Student must be accepted at a secondary educational institution;
- Preference given to undergraduate applicants, but graduate students may also apply.

We look forward to receiving your application!

#### GJCC Officers

Lisa Stanton, *President* Janice Carpenter, *V. President* Fredia Kennedy, *Secretary* John S. Slaughter, *Treasurer*  Education Committee Ray W. Goodall, Sr. Chair Astorie T. Acty Fredia Kennedy Lisa Stanton

Website: www.georgejamescc.com

Rev: 10/04/2019 LCS

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# Scholarship/Education Assistance Application for AY: 2020-21 DUE: Friday March 13, 2020

## **Personal Information:**

Name:		
(Last) Address:	(First)	(Middle)
City/State/Zip:		
Phone:	I	Email:
Parent/Guardian:		Phone:
Educational Informat	ion:	
High School (or Progra	.m):	
(Please provide inform	ation about the college	e/technical/other school you plan to attend)
Will you attend: Four Y	ear School Comm	unity CollegeTechnical Other
Have you been admitte	d: Yes No Nam	ne of School
School Address:		
School Student Financi	al Office Phone:	Student ID#:
Statement of Needs ar	d Goals: Please write	a statement explaining your reasons for submitting
this application. Includ	le your personal circum	stances related to your need for financial assistance,
along with your acaden	nic standing, career goa	lls and your role/involvement in community
activities. Attach an ad	ditional sheet if you rea	quire more space to discuss your Needs and Goals.
Signature:		Date:

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