REQUIREMENTS FOR SCHOLARSHIP GRANTS from JAGA CHARITABLE TRUST

The Scholarship grant is for a maximum period equivalent to four years of undergraduate study at an accredited college, university, or trade school. In order for an applicant to be considered for a scholarship grant and continue to receive this grant during their undergraduate college career, the following requirements must have been and continue to be met during the period of the scholarship grant.

- Scholarship applicants who are associated with a JAGA member organization must meet one of the following requirements:
 - Be a member, the child or grandchild of a member who belongs to a JAGA member organization.
 - Be an employee, child or grandchild of an employee who is employed by a JAGA member organization.
 - Be an active member, or the child, or grandchild of a Men's Golf Association (MGA) or a Ladies Golf Association (LGA) representing a JAGA member organization.
 - Be an active participant in golf programs offered by JAGA member organizations.
 - Assistant Golf Professionals that are employed by JAGA member organizations after satisfactory completion of Level One and Level Two may apply for financial assistance in attaining Level Three Certification.

In addition, the scholarship applicants must meet the following criteria:

- The applicant must reside within the geographical boundary as defined by the location of the JAGA member organizations.
- An applicant may be a graduating high school senior, who has received an acceptance letter from an accredited college/university, or an existing undergraduate attending an accredited college/university who is working toward their bachelor's degree.
- Each applicant must have a JAGA Director as their contact person during the application process. The JAGA Director must represent the same JAGA member organization as the applicant.
- Applicants can also apply to accredited vocational schools.
- Submit a copy of applicant's high school diploma or equivalent when received. (May not be available until after the application is submitted.)
- Submit a copy of the letter of acceptance from an accredited college, university, junior college, or trade school which the applicant plans to attend. If an applicant is currently attending an accredited college, then submit a transcript of their current grades acquired for the hours completed.
- Submit a letter of recommendation from the JAGA Director of the JAGA member organization with which the applicant is affiliated and, if there is no Director at your club, then submit a letter signed by the head golf professional, greens superintendent, and/or club manager or president.
- Submit a letter from the applicant requesting said scholarship and include the following: plans for life's work, golf background and experience to date, leadership and communications skills experience, other scholarships applied for and/or received to date.

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The applicant must include a copy of the (EFC)-Expected Family Contribution obtained from a completed FAFSA.

Upon award of a scholarship grant, the student is expected to take a minimum of twelve credit hours each semester. Less than twelve credit hours. *The student is also required to maintain*:

a) A cumulative grade point average of 2.0 minimum on a 4-point system.

b) A cumulative grade average of C as a minimum on a letter system.

Subsequent to the receipt of a scholarship grant, the recipient must provide a transcript of their grades, for each grading period, to the Scholarship Chairman. Failure to provide a copy of the grades within two weeks after the grades are given to the student may result in the discontinuance of the scholarship grant.

Application must be submitted no later than March 31st.

The above terms and requirements are acceptable to me during the period of time that I am granted a scholarship by the Jacksonville Area Golf Association.

APPLICANT'S SIGNATURE

Date

Accepted by: ____

JAGA Director

APPLICATION FOR JACKSONVILLE AREA GOLF ASSOCIATION CHARITABLE TRUST SCHOLARSHIP

	_ Date: _ Last Four SS# :			
PLEASE PRINT OR TYPE				
Last Name	First	MI		
Residential Addre	SS			
City	State Zip	_ (<u>)</u> Phone		
Email Address				
JAGA Affiliated Cl	ub			
JAGA Director				
High School		Date Graduated		

Date to enroll

FAMILY BACKGROUND*

*Use this form only if still living with parents and you are under the age of 21.

Father's name:				
His place of Employment:				
His position:		Phone:		
Email address:				
Mother's Name:				
Her place of employment:				
Her position:	_Phone:			
Email address:				
Other members of family living at home:				
Name	Age	Relationship		
Name	Age	Relationship		
Name	Age	Relationship		
Name	Age	Relationship		

RELEASE OF INFORMATION AUTHORIZATION

I hereby authorize _________ (fill in the name of your college, university, junior college, or trade school to release any and all information relating to grades earned, semester hours taken, scholarships and/or grants-in-aid received, to the Jacksonville Area Golf Association Charitable Trust).

I understand that refusal to do so could result in my JAGA Scholarship being terminated.

JAGA Scholarship-Applicant

Date

Send to:

Joseph Grippi 8165 Woodpecker Trail Jacksonville, Florida 32256 904-608 3734 jtgrippi@gmail.com