

Culinary Explorers Scholarship Application

Applicants for this scholarship must be a high school senior who has successfully completed the Culinary Explorers and be competitive among their peers as the Top Performing Explorer". Recipients must maintain a 2.5 GPA to be eligible for renewal.

ersonal Information		
Last Name:	First Name:	Middle:
Last 4 of SSN:	Date of Birth:	Email:
Street Address:		
City:	State: Zip Code:	Phone Number:
U.S. Citizen or Permane	nt Resident Yes: No:	
Have you completed ar	Admissions application? Yes:	No: If yes, list your A number:
cademic Information	1	
High School attended:_		
ACT Score: N	Nonth and year Taken:	
	Class Rank:	
nancial Resources		
Will you be receiving an	v other scholarships for the 2020-2	2021 academic year? Yes: No:
If yes, please list the sch	olarships you will receive:	.ozi academic yearr Yes: No:
3	day of Control 1 and 1 a	
Will Vocational Rehabilit	ation, WIA, VA, or any other state	or federal government agency pay your tuition
and fees? Yes: No	: If yes, list programs:	
I grant permission to rel awarded a scholarship, press releases.	ease information from my educati grant permission to Jefferson Sta	ional and financial records to scholarship donors. I te Community College to issue
Applicant Signature:		Data
9 7 8		Date:

This scholarship application should be returned to the Culinary & Hospitality Institute with one recommendation and a two-page essay. If you have any questions regarding the application process, email CHI@jeffersonstate.edu

JSCC OFFICE US	E ONLY
Recommendation	
Resume	
HS Transcript	
ACT Score	
Essay	
Class Rank	
GPA	
ADMAP	

Jefferson State does not discriminate on the basis of race, color, national origin, sex, disability, or age in its admissions, programs and services in compliance with Title VI and VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Title IX of the Educational Amendments of 1972 and the Americans with Disabilities Act of 1990.