

JERRY JESKEY MEMORIAL SCHOLARSHIP

Please read the information on this cover sheet carefully BEFORE completing the attached application.

What is the Jerry Jeskey Memorial Scholarship?

The Jerry Jeskey Scholarship is presented annually in memory of the late Jerry Jeskey, a radiographer and educator in radiography for many years. There are 2 scholarships given to 2 juniors who may be ineligible for other types of financial assistance but requires financial assistance to continue their education. The selection is made each spring and is based on financial need and scholastic standing in the Radiography Program.

Who May Apply

Junior Radiography students in good academic standing with the University and expected to graduate in May 2019.

Application Process

You must complete the Free Application for Federal Student Aid, from Financial Aid Services, the attached application, and a statement of need, all in their entirety to be considered for the award. Please ensure the application is typed.

Include in your packet:

- The application
- The statement of need
- A copy of your unofficial student transcript
- The student aid form

Applicants must return the application, the statement of need, a copy of your unofficial student transcript, and a copy of the FAFSA, all collated and stapled together to Office of Academic and Student Services room 1009, College of Allied Health Building.

No additional information should be attached as only the officially requested information will be considered by the committee.

Deadline

The application **deadline is 4:00 p.m. July 1st**. Applications will not be accepted after the deadline.

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Application

Complete All Blanks

Please Type application before printing/signing

Student Information

Name _____ S.S.# _____
Last First M.I.

Address _____
Street City State Zip

Home Phone _____ Work Phone _____

Sources of Income/Support

Are you employed: Yes No _____
If yes, name of employer _____

Time employed (how many months/years?) _____

Spouse/Parental/Other Additional Support? [List all that apply]

Name _____
Last First Relationship Amount

Name _____
Last First Relationship Amount

Name _____
Last First Relationship Amount

Personal Information

Did you qualify for any grants or scholarships? Yes No Please list all you received below.

Name _____ Amount _____

Name _____ Amount _____

Name _____ Amount _____

Did you file an Income Tax return for the previous year? Yes No

If yes: amount of refund \$ _____ amount paid \$ _____

Do you have dependents for which you are financially responsible? Spouse: Yes No Parents: Yes No

Children: Yes No _____
Number and ages of children

Please note that this application will be considered incomplete without a separate typed statement of need in the students own words.

All of the above information reflecting my financial circumstances is true and accurate.

Signature of Student Applicant: _____ Date: _____