



JUNIOR LEAGUE OF OWENSBORO
Women building better communities®

Name: _____
 First Middle Initial Maiden Last

Address: _____
 Street City State Zip

Home Phone Number: _____ Cell: _____ Best time to call: AM/PM

E-mail: _____ Date of Birth: _____

List high schools and colleges attended. (Transcripts must be included with application.)

School	Location	From	To	Did you graduate?	G.P.A.

Date of High School Graduation or Date GED obtained: _____

Current or most recent employment: _____

Name of college/school you attend or plan to attend: _____

Have you been accepted? _____

Are you currently attending or when do you plan to start? _____

What degree are you seeking? _____

Please respond to the following questions on a separate TYPED sheet of paper.

1. Why did you decide to further your education?
2. What are your career objectives?
3. Briefly describe how you have positively affected the community in which you live. (Please list activities, volunteer efforts, organizations, awards, and honors.)
4. Do you have a financial need? If so, please explain.
5. Why do you feel the Junior League of Owensboro should invest in your education?

Please send your high school and college transcripts along with this application to:

Junior League of Owensboro
 P.O. Box 1703
 Owensboro, KY 42302

Or email to: info@jlowensboro.org

Deadline for Applications is April 30th
Scholarship recipients will be notified by May 30th