



# BRADLEY JOHNSON MEMORIAL FOUNDATION SCHOLARSHIP APPLICATION

(The Bradley Johnson Memorial Foundation is a 501 (c)(3) Organization)  
ALL BLANKS MUST BE FILLED IN

NAME OF APPLICANT: \_\_\_\_\_  
First name Middle Name Last name

I WILL ATTEND: \_\_\_\_\_ (Telephone Number) \_\_\_\_\_  
(We MUST have the name of ONE College/University/Vocational School. [If unknown at the time of application, list first preference] Any changes in the selection of college a winning applicant must notify the Scholarship Director IMMEDIATELY. Checks will be mailed directly to the college.)

Address of the College/University: \_\_\_\_\_  
(Please list University officer and address where the scholarship check is to be mailed)

Student Identification Number assigned by College/University: \_\_\_\_\_

## PART 1 – PERSONAL & FINANCIAL PROFILE

STUDENT'S PERMANENT HOME MAILING ADDRESS: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

LISTED HOME TELEPHONE NUMBER: \_\_\_\_\_

AGE: \_\_\_\_\_ SEX: Female \_\_\_ Male \_\_\_ (Marital status) S \_\_\_ M \_\_\_ W \_\_\_ D \_\_\_

NAME OF PARENT OR GUARDIAN OR SPOUSE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ Telephone No: \_\_\_\_\_

NUMBER OF CHILDREN IN FAMILY STILL AT HOME \_\_\_\_\_ AGES: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

GROSS FAMILY INCOME: (Check correct range figured in U.S. currency)

- |                       |                       |                       |                        |                       |
|-----------------------|-----------------------|-----------------------|------------------------|-----------------------|
| ___ Under \$10,000    | ___ \$10,000/\$15,000 | ___ \$15,000/\$20,000 | ___ \$20,000/\$25,000  | ___ \$25,000/\$30,000 |
| ___ \$30,000/\$35,000 | ___ \$35,000/\$40,000 | ___ \$40,000/\$45,000 | ___ \$45,000/\$50,000  | ___ \$50,000/\$55,000 |
| ___ \$55,000/\$60,000 | ___ \$60,000/\$65,000 | ___ \$65,000/\$70,000 | ___ \$70,000/\$75,000  | ___ \$75,000/\$80,000 |
| ___ \$80,000/\$85,000 | ___ \$85,000/\$90,000 | ___ \$90,000/\$95,000 | ___ \$95,000/\$100,000 | ___ Over \$100,000    |

ARE YOU PRESENTLY EMPLOYED? \_\_\_ Yes \_\_\_ No Number of hours worked per week? \_\_\_\_\_

NAME OF EMPLOYER: \_\_\_\_\_ BUSINESS: \_\_\_\_\_

TELEPHONE OR E-MAIL OF EMPLOYER: \_\_\_\_\_

I HAVE MADE APPLICATION FOR FINANCIAL AID: YES \_\_\_ NO \_\_\_

HOW MUCH FINANCIAL AID WILL YOU RECEIVE? \$ \_\_\_\_\_ NA \_\_\_ UNKNOWN \_\_\_\_\_

**PART II - ACADEMIC PROFILE**

**LAST HIGH SCHOOL ATTENDED:**

Name of High School City State/Country Dates: (From / To)

HIGH SCHOOL GPA \_\_\_\_\_ [most recent - verified by transcript]

COMPOSITE ACT SCORE: \_\_\_\_\_ [verified by transcript]

TEST SCORES (verified by transcript): (Most Recent) SAT: [Math] \_\_\_\_\_ [Verbal/Critical Reading] \_\_\_\_\_

Home Schooled: \_\_\_\_ Yes \_\_\_\_ No Dates: (From/To) \_\_\_\_\_

ATTENDED COLLEGE/UNIVERSITIES or TECHNICAL/VOCATIONAL SCHOOLS: \_\_\_\_ Yes \_\_\_\_ No

Name of School City State Country Dates (From/ To)

COLLEGE/UNIVERSITY GPA (most recent verified by transcript) \_\_\_\_\_

My College/University has an UNGRADED (Pass/Fail) system. Please use my test scores: \_\_\_\_ Yes \_\_\_\_ NA

DEGREES/CERTIFICATES/HOURS EARNED: \_\_\_\_\_

MY CAREER PLANS ARE: \_\_\_\_\_

I have included with the completed [ALL BLANKS FILLED IN] signed application:

- (1) my one page typed original personal letter stating why the Bradley Johnson Memorial Foundation should review your request,
- (2) two (2) signed current letters of recommendation,
- (3) my most recent original certified transcript & school's grading system,

Signature: \_\_\_\_\_  
(Application MUST be signed and dated by the Applicant) DATE

***“PRIVACY POLICY”*** The information requested on the BJMF Scholarship Application is used to process and identify eligibility for the BJMF Scholarships as appropriate for the selection process of this scholarship program. The BJMF respects and understands the importance of your privacy and the sensitivity of your personal information and carefully protects your data from misuse. The BJMF will not give, sell, share, or provide access to your personal information to any individual, organization, or company for its use in marketing, commercial solicitation, or for any other purpose.

Please attach two letters of recommendation, your original certified transcript, and a one-page typed personal letter stating why the Bradley Johnson Memorial Foundation should review your request. These documents are required in order to submit your application.

Please mail these documents to P.O. Box 3933, Auburn, AL 36831.



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