



2017 CALVIN JOHNSON JR. FOUNDATION FOOTBALL ATHLETE SCHOLARSHIP APPLICATION

Deadline: April 21, 2017

COMMITTEE USE ONLY

Date Rec'd _____

Tracking # _____

Applicant Information:

Full Name:	
Address:	
City/State/Zip:	E-Mail:
Home Phone:	Cell Phone:
Date of Birth:	Place of Birth:

Education Information:

High School:	Graduation Date:
High School Address:	
Overall G.P.A.:	
ACT and/or SAT score:	ACT: SAT:
High School Football Position:	
Extracurricular Activities (athletics, music, clubs, community service and etc.): <i>attach additional sheets if necessary</i>	
University you plan to attend:	
Anticipated Academic Major:	
Career Plans:	
List all special honors and awards you have received during your high school career: <i>attach additional sheets if necessary.</i>	

Essay:

On a separate sheet of paper, please write an essay of at least 300 words on:

Describe your career goals and how the Calvin Johnson Jr. Foundation Scholarship will help you to achieve these aspirations.



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Parent/Guardian Information:

Name of parent(s)/Guardian(s):	
Address:	
City/State/Zip:	E-Mail:
Home Phone:	Cell Phone:
Number of Siblings:	List Ages:

Financial Information:

Parents'/Guardians' combined income per year:
Number of family members attending college in Fall 2017:
Describe your financial need for a scholarship:
List current known sources of scholarships, grants, or financial aid:
If awarded this scholarship, how will you pay for the rest of your tuition and fees?
Have you been offered a full scholarship from a college/university? Yes _____ No _____

***** Send the following with your application packet:**

1. College or University acceptance letter copy with your application packet
2. Send an official high school transcript to: CJJRF, P. O. Box 1015; Tyrone, GA 30290
3. Letters of references from your football coach and teacher

I certify that the information given on this application is true. I understand that falsification of any information may result in termination of any scholarship granted by CJJRF. My signature below verifies that I have read and accept these conditions.



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Signatures:

Applicant: _____ Date: _____

Parent/Guardian: _____ Date: _____