

J★ROCKS PIZZERIA

SCHOLARSHIP FUND



A Message from J★Rocks Pizzeria

Greetings Applicant,

I am honored that you are considering applying for the J★Rocks Scholarship Fund.

My hope is that through this scholarship I can continue my efforts to pave the way for youth and young adults in High School and across the Marion County. I realize the power in investing in our younger generation and this scholarship is just that—an investment into the life of several deserving students. This scholarship is intended to help someone become successful and be a true servant to his or her community as they attend a two-year or four year college or university.

My scholarship committee and I can't wait to review your application. We look forward to learning more about you and choosing our next scholarship recipient. To be considered, please complete your application and submit it by the deadline. If you have any questions, do not hesitate to contact me at 352-895-8221 or by email at jerrielbazile1@yahoo.com.

Best Wishes,
Jerriel Bazile



Inspiring Others To Follow Their Dreams!

The J★Rocks Scholarship Fund was founded in 2019. The J★Rocks Scholarship Fund (JBSF) aims to help pave the way for graduating seniors who seek to attend a post secondary institution. The scholarship will be awarded annually to students based on academic excellence, level of community and leadership involvement, and financial needs.

Scholarship Criteria:

- Applicant must possess a minimum 2.0 cumulative GPA on a 4.0 scale
- Applicant must be a graduating senior who will attend a 2-4 institution as a full time student
- Applicant must include a 500 word essay on your beliefs relative to volunteerism and commitment to the community
- Applicant must complete the application and submit by the deadline
- Applicant must submit an official transcript in a sealed envelop
- Applicant must submit a head shot picture (picture will not be returned)
- Applicant must submit 2 letters of recommendation from such people as the school counselor, teacher or coach (not a family member)

* Deadline: May 1

Amount of Scholarship:

\$500.00



J★Rocks Scholarship Fund Application

Please complete this application in its entirety for consideration.

SECTION ONE - Student Information

Student Name: _____

Mailing Address: _____

City, State, Zip Code: _____

County of Residence: _____

Phone (include area code): _____

Email: _____

Gender: _____ Date of Birth: _____ Social Security Number: xxx - xx - _____

Mother's Name: _____ Father's Name: _____

Mother's Highest Level of Education: _____

Father's Highest Level of Education: _____

List any academic awards and distinctions you have received during your high school career: _____

List the colleges or universities you have been accepted to:

Which college or university will you attend starting Fall 2011:

_____ Is this
school a: 2-year college 4-year college 4-year university



J Rocks Scholarship Fund

Will you be attending school: full-time part-time?

Proposed field of study: _____

Do you plan on pursuing a graduate degree? If so, identify: _____

What is your long-term career goal? _____

How did you hear about the J★Rocks Scholarship Fund? _____

List any extracurricular or community service activities in which you have been involved over the past two years:

List any work experience:

SECTION TWO - Financial Information

Have you applied for other scholarships, financial aid or grants for the 2011 - 2012 school year? Yes No

Will you work during the school year? Yes, No If so, numbers of hours weekly_____

Will you have to take out a loan to cover your tuition expenses? Yes No



J★Rocks Scholarship Fund

SECTION THREE - Required Certification and Release

Applicant Certification

I certify the information provided in this application is, to the best of my knowledge, true and correct. I have not knowingly withheld any facts or circumstances that could otherwise jeopardize consideration of this application.

Signature of Applicant _____ Date _____

Signature of Parent / Guardian _____ Date _____

(if applicant is under 18)

Release of Information - must be signed by applicant AND parent / guardian

By signing this application, I hereby (I) formally authorize any individual regarding any portion of this document to provide information of any kind whatsoever requested by the staff and representatives of the J★Rocks Scholarship Fund, and (II) forever release any the entities or individuals seeking or providing such information.

Signature of Applicant _____ Date _____

Signature of Parent / Guardian _____ Date _____

**Mail all completed documents to:
J★Rocks Pizzeria, Jerriel Bazile
2606 SW 19th Ave. Rd. Suite 103,
Ocala, FL 34471
(352) 895-8221**