

Do not duplicate

RJT FOUNDATION, INC.

EDUCATIONAL ASSISTANCE ENCOURAGEMENT AWARD SCHOLARSHIPS

APPLICATIONS MUST BE RETURNED BY MAIL POSTMARKED OR
HAND DELIVERED NO LATER THAN May 21st (4:00 p.m.)

Read the description of each scholarship, then select the one you wish to apply for (check one)

\$500 - ASLADS Scholarship (Angelese Sophia Ladson & Da'Von Scott Jr.)

\$1000 - JAW Scholarship (Jerry A. Wright)

\$500 - REB Scholarship (Roman Edwin Bradley)

Step 1

DATE:		
STUDENT NAME:		CONTACT #:
ADDRESS:		CITY/STATE: ZIP CODE:
EMAIL ADDRESS:		DATE OF BIRTH:
SCHOOL NAME: SCHOOL ADDRESS: COUNSELOR OR CAP ADVISOR NAME & CONTACT NUMBER:		
GPA:	S.A.T SCORE:	A.C.T SCORE
VOLUNTEER HOURS:	Are you a member of any Club/Organization?	
Are you employed?	Name of Club/Organization:	
Gender Male Female <input type="checkbox"/> <input type="checkbox"/>	Which one of the following applies to you: (Check all that apply)	
National Origin:	I am a crime survivor	<input type="radio"/>
Number of household members:	I am a dependent of a homicide victim	<input type="radio"/>
Are you eligible for Financial Aid?	I am the sibling of a homicide victim	<input type="radio"/>
Name and address of Post-Secondary Institute you will attend:		<input type="radio"/>
I am expecting a child or have a child by a homicide victim		<input type="radio"/>

Step 2

Please attach an essay (**Note:** it should be typed and double spaced containing a minimum of 500 words not to exceed 700) choose from a topic below:

1. The impact of violent crimes in my community
2. Think about a loved one you lost to violence (Describe the impact it had on your life)
3. If you could tell Congress about changing gun laws to make your community safer, what would you say?
4. What solutions do you have for combating gun violence?

Step 3

(Optional) You may wish to include a cover letter to:

Thank the scholarship committee for the opportunity to apply for the scholarship, describe any additional significant information you weren't able to include in the application materials and/or give reasons why you're a good candidate for the application.

Final **Step 4**

Submit your completed application to the address listed below prior to the deadline date of ~~April 6, 2019~~ at 4:00 p.m. (Remember to attach the required documents to complete the application process)

RJT Foundation, Inc.
Attention: Scholarship Review Committee
13850 NW 26th Avenue, Suite 207
Opa Locka, Florida 33054

(Applicant Signature)

(Date)

For students under the **age of 18**, a parent authorization is required to complete the application process.

Notice to Parents: If you agree to allow your child to complete this scholarship application, please sign below:

I give my child, _____ (student's name) permission to apply for the RJT Foundation Educational Assistance Encouragement Award Scholarship. I understand that certain educational information is being requested to complete the application process and if provided does not guarantee that my child will be awarded the scholarship. I further give RJT Foundation Inc. permission to take photographs of my child in the event he/she is awarded a scholarship.

(Print) Parent/Guardian Name

Email Address

(Sign) Parent/Guardian Name

Date

Phone Contact #

Important Notice of Eligibility:

The Scholarship Awards Committee Team will base their decision on the overall grade point average, essay, financial need and the completeness of the overall application. These scholarships were specifically tailored to assist individuals who have been impacted by violence or are crime victims, crime survivors, dependents or siblings of homicide victims. Applicants must be a resident of **Miami-Dade County**.

.....DO NOT FILL IN BELOW FOR DEPARTMENTAL USE ONLY.....

(Applications are for RJT Foundation, Inc. purposes only and will not be shared with any outside source or 3rd party)

Reviewer Initials:	Score:	Reviewer Initials:	Score:	Reviewer Initials:	Score:
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