



Julia Bennett Scholarship Award 2019

Julia's Kids Incorporated is a non profit organization that helps children explore options for coping after the loss of a parent or caregiver. Founded in 2016, this non profit organization utilizes art therapy, pet therapy, music therapy, exercise/yoga and traditional group counseling with an introduction to journaling to facilitate expressions of grief and identify loss.

Program Guidelines:

- Applicant must have lost a parent/caregiver due to death, incarceration or permanent separation
- Prove acceptance into a qualifying vocational, 2 or 4 year college/university
- GPA of 2.5 or higher
- Complete 500-750 word essay
- Applications accepted April 1st – April 30th each year
- Open to all graduating seniors regardless of age, race or gender
- 1 teacher recommendation

The applications will be reviewed and recipients selected by a committee appointed by the organization. The scholarships will be awarded in May 2019.

Please submit any questions to: juliaskidsinc@gmail.com or call 954-800-3953

JULIAS KIDS SCHOLARSHIP APPLICATION 2019

Please type or print legibly:			
1.	Last Name:	First Name:	
2.	Mailing Address Street: City: State: Zip:		
3.	Daytime Telephone Number: () Email Address:		
4.	Date of Birth: Month Day Year Gender:		
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) Attach proof of GPA. Your most recent school transcript is required.		
6.	Are you the first person in your family to go to college: YES ____ NO ____		
7.	Name and location of High School attending:		
8.	(If your resume or activities sheet answers question 8, please attach and skip to Question 9.) A. List any academic honors, awards and membership activities while in high school: B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities: C. List your non-school sponsored volunteer activities in the community:		
9.	A. If you have decided on what college you will attend, please list school name: B. If not, list your top 3 college choices:		
10.	A. Parent/Guardian:	B. Email:	C. Phone:
11.	Include address if different than your own listed in Question 2.) Name(s) : Street: City: State: Zip:		

12. On a separate sheet please write an essay (500-750 words) answering the questions below:

Therapy has been a proven method to help individuals who have experienced a loss. Traditional forms of therapy include speaking with a grief counselor individually or in a group. Alternative methods of therapy include from art therapy, pet therapy, music therapy, exercise or yoga, and journaling. Of all the methods available, explain which one(s) you feel have been the most beneficial for you and why. If you have not used any of the methods described, write about what you have done to cope with your loss and explain why you would recommend it to others.

STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the Julia's Kids scholarship program.

I hereby understand that if chosen as a scholarship winner, according to Julia's Kids Scholarship policy, I must be present at any awards ceremony or reception in May 2019 to receive my scholarship award.

I hereby understand that if chosen as a scholarship winner, according to Julia's Kids Scholarship policy, it is my responsibility to remit to the organization the appropriate information for my scholarship to be paid directly to my educational institution. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

Signature of scholarship applicant: _____ **Date:** _____

STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I support this application to Julia's Kids.

Name of Guidance Counselor : _____

High School: _____

Contact information (phone): _____

Signature of Guidance Counselor: _____ **Date:** _____

Checklist

- ___ Application
- ___ Essay
- ___ Resume/Activity Sheet
- ___ School Transcript (Unofficial)
- ___ Guidance Counselor signature

E-MAIL COMPLETE APPLICATION PACKAGE TO:
juliaskidsinc@gmail.com

REMINDER:
The deadline for this application to be received by:
APRIL 30th, 2019